



# QUEENSLAND POLICE UNION

## PART-TIME MEMBERSHIP DUES

### **Any member who works part-time hours is entitled to a reduction in Union Dues.**

Members working part-time must contact the QPUE and make application to pay the part-time rate. Members are required to complete a form advising the QPUE of the hours worked per fortnight and supply **a letter or documentation from the Queensland Police Service verifying the part-time hours being worked.** One of our elected officials will approve the application and it will be processed accordingly. Union Dues for part-time workers are calculated according to the following:

#### **QPUE Membership Rule 6.2.1:-**

"The annual Membership Fee payable by part-time police officers shall be seventy two percent (72%) of the membership fee as set out in 6.1.1."

#### **QPUE Membership Rule 6.2.2:-**

"The annual membership fee payable by part-time non sworn members shall be 72% of the membership fee as set out in 6.1.3."

#### **QPUE Membership Rule 6.2.3:**

"Part time membership fees for all members are only accessible where the part time duty is to be continuous for 12 weeks or more."

#### **QPUE Membership Rule 6.2.4 states:-**

"It shall be the responsibility of any Member working part-time to notify the QPUE for the purpose of a reduction in dues and further that any Member who fails to notify the QPUE of such part-time duties shall not be entitled to any reimbursement. The onus shall be upon any Member returning to full-time duties from part-time duties to notify the QPUE of such change."

A Member who fails to do shall remain unfinancial until the outstanding dues are paid. Part-time members have 30 days from the date of change to notify the QPUE."



# PART TIME APPLICATION FORM

..... / ..... / .....

Ref No: .....

TO: Mr M Barnes  
General Secretary  
Queensland Police Union of Employees  
PO Box 13008  
GEORGE ST BRISBANE QLD 4003

Dear Sir

**RE: APPLICATION TO PAY PART-TIME RATE WHILSTWORKING PART-TIME HOURS**

I hereby make application to pay reduced Union dues as I am now working part-time as follows:-

NUMBER OF HOURS/FORTNIGHT WORKED: .....

FULL NAME: .....

ADDRESS: .....

REGISTERED NUMBER: .....

STATION: .....

COMMENCEMENT DATE FOR PART-TIME HOURS: .....

COMMENCEMENT DATE FOR PART-TIME HOURS: .....

**CONDITIONS**

I understand that I can only apply to pay the part-time rate if my Union Dues are fully paid up to date of commencement of part-time work. I also understand that I must recommence paying full Union Dues when I finish working part-time. If the Union is not advised if I recommence full time duties sooner than the date specified above then I will pay back Union Dues for the full rate. I will recommence paying the full rate when I return to full duties.

***Please find enclosed a letter or documentation from the Service verifying the commencement date and for what period of time, the part-time duties are performed.***

Yours faithfully

Signed ..... Date .....

Approved ..... Date .....



# AUTHORITY TO PAY UNION DUES BY PAYROLL DEDUCTION

TO: Executive Manager (Payroll)  
Human Resource Management Branch  
PartnerOne (Shared Service Provider for QPS)  
GPO Box 1395  
BRISBANE QLD 4001

You are hereby authorised to pay the Queensland Police Union of Employees by fortnightly installments my Union dues as indicated below. Approval is also given to alter the deduction in accordance with changes to annual dues.

- |                          |                                    |         |
|--------------------------|------------------------------------|---------|
| <input type="checkbox"/> | POLICE RECRUIT                     | \$14.00 |
| <input type="checkbox"/> | POLICE OFFICER                     | \$28.00 |
| <input type="checkbox"/> | PLO/PIPE BAND (NON SWORN)          | \$19.60 |
| <input type="checkbox"/> | ASSISTANT WATCHHOUSE OFFICER       | \$19.60 |
| <input type="checkbox"/> | PLO/PIPE BAND (PART TIME)          | \$14.10 |
| <input type="checkbox"/> | PART TIME (2-64 Hours per f/night) | \$20.15 |

This authority is to commence forthwith and shall remain in force until cancelled by me in writing.

.....  
(Surname)

.....  
(Given Names)

.....  
(Payroll Number)

.....  
(Station)

.....  
(Region)

.....  
(Signature)

.....  
(Date)