Name:		
Former last name (if applicable):		SSN:
Address:		
City:		
Below is a record of my former student m	embership in N	NDU (if out-of-state, please
include verification, i.e. membership card,	, cancelled che	ck for dues payment)
COLLEGE, STATE		SCHOOL TERM
I certify that this is my first year of educ an active member with the		
Signature		Date

Rebate Procedure:

1. The current school year must be your first year of educational employment, and you must hold NDU Active membership. (Substitute members are not eligible for the rebate.)

2. The application must be completed and returned by May 1 to: ND United, 301 N 4th Street, Bismarck ND 58501-4020

- 3. Verification of your membership will be made, and a rebate check will be mailed to you.
- 4. NDU rebates will be issued for \$20/year for each year of student membership (up to five years) starting December 1.
- 5. NEA rebates will be issued for \$20/year for each year of student membership (up to five years) starting May 1.

\$	Membership verified by:	Date:
Account: 8	301 Voucher #	Check # and date:
Don't fill out this part. This is for official use only.		