

DES Administrative Services Procedure No. 13.5.1

Professional Association Dues

Title:	Professional Association Dues
Applies To:	Engineering & Architectural Services employees
Information Contact:	Engineering & Architectural Services
Effective Date:	April 14, 1993
Last Update:	March 1, 2015
Approved By:	 <hr style="width: 20%; margin-left: auto; margin-right: auto;"/> /s/ <hr style="width: 20%; margin-left: auto; margin-right: auto;"/> William Frare Assistant Director, Engineering & Architectural Services

Related policy: 13.5 Professional Association Dues ([link](#))

Background

This policy applies when an E&AS professional would like to commit to joining and participate in a Professional Architectural and/or Engineering Association.

Participants include:

- E&AS staff member
 - Manager of staff member requesting financial support
 - Administrative support staff
 - DES Agency financial office
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Summary of Tasks

Action By	Action
E&AS staff member	1. Prepare memo (form below) & send to your Manager for signature
Manager	2. Signs Form
E&AS staff member	3. Complete application to association with all required fees. 4. Submit signed memo form and copy of Association application along with A19 invoice to Administrative staff.
Administrative support Staff	5. Submits paperwork to DES financial Office.
DES financial office	6. Reimbursement funds are put into staff member' bank account and copy of receipt is mailed out.

Professional Association Dues Request Memo 13.5.1

TO: Team _____, Manager
FROM: _____ (Applicant)

RE: Request for Payment of Professional Dues

Pursuant to Policy 13.5 Professional Association Dues, I am requesting that E&A Services pay ½ of the professional dues for my membership in _____ for the period from _____ to _____.

The Annual cost of this Association member ship is \$ _____ x50% = _____ (\$300.00 max.)

I have reviewed the E&AS policies and procedures on professional dues 13.5 and agree to abide by their requirements.

Thank you.

_____ Applicant signature Date: _____

_____ Approved / Disapproved Date: _____

Manager

Comments:

Attachment: A19 Invoice Form