Suomen Journalistiliitto
Finlands Journalistförbund

MEMBERSHIP APPLICATION
UNION/UNEMPLOYEMENT FUND

Association no _____

☐ New member ☐ Rejoining ☐ Change in employment ☐ Change in membership status

☐ Change in association, from (name of association) _____ Membership no _____

PERSONAL INFORMATION		
Surname	First name (underline commonly used name)	Personal ID number (date of birth)
Address	Mother tongue ☐ Finnish ☐ Swedish ☐ Other, specify	
Post code	Post office	Nationality ☐ Finnish ☐ Other, specify
Home telephone number (with area code)	Work telephone number (with area code)	Mobile phone
Work e-mail address	Other e-mail address	
☐ My contact information may not be released to insurance providers.	Professional title	
EMPLOYMENT INFORMATION		
Employer	Group	
Address	Post code and post office	
Workplace (magazine, editorial office, etc.)		
Address	Post code and post office	
Type of workplace ☐ Newpaper ☐ Magazine ☐ Local paper ☐ Organisation paper ☐ Customer magazine ☐ Staff magazine ☐ Yleisradio ☐ MTV3 ☐ Private TV station ☐ Private radio station ☐ Programme production company ☐ News agency ☐ Picture agency ☐ Publishing company ☐ Communications company ☐ Multimedia ☐ Other, specify		
Type of employment ☐ Permanent, full-time ☐ Fixed-term, full-time ☐ Permanent, part-time ☐ Fixed-term, part-time		
Duration of employment Began Ends	Regular working hours Hours/week	Average monthly wages (excluding evening and other work supplements)
Is journalistic work your main source of income? ☐ Yes ☐ No		
Former employer	Employment ended on	
FREELANCER/SELF-EMPLOYED		
I work primarily ☐ for the press ☐ for radio or television ☐ for other, specify		
☐ I have my own company, name	Average gross monthly earnings (expenses deducted before taxes) €/kk	
Principal income from journalistic work since the year:	Percentage of income from journalistic work: %	

JATKUU

EDUCATION

Basic education ☐ Primary school ☐ Upper secondary school

Degree in the editorial profession	Polytechnic degree Year _ _ _ _
Academic degree in journalism Year _ _ _ _	☐ Degree in Culture and Arts ☐ Other, specify _____
☐ Master's degree ☐ Bachelor's degree	Other degree Year _ _ _ _
☐ Other academic degree, intermediate studies in journalism	☐ Academic degree in another field, specify _____
☐ Other professional degree, specify_____	☐ Other training/diploma, specify _____

MEMBERSHIP IN THE UNEMPLOYMENT FUND (MUST BE FULLY COMPLETED BY EMPLOYED WORKERS)

As a member benefit, the Union of Journalists in Finland can represent an employed member in the Unemployment Fund for Journalists; this information is transferred directly to the Unemployment Fund. Upon transferring within a month from one unemployment fund to another and upon submission of proof of the transfer to the Unemployment Fund for Journalists, we will take earlier membership and employment into account. Self-employed persons may, if desired, apply separately to be a member of the unemployment fund intended for entrepreneurs.

☐ I will join the Unemployment Fund for Journalists ☐ I do not wish to join the Unemployment Fund for Journalists

☐ I wish to transfer to the Unemployment Fund for Journalists ☐ I am already a member of the Unemployment Fund for Journalists

I am transferring from another unemployment fund, name joining date

ENTREPRENEURSHIP (UNEMPLOYMENT SECURITY ACT, Section 6)

I am self-employed as intended by the selected statement:

☐ I am under an obligation to insure in accordance with the Self-employed Persons' Pensions Act.

☐ I work in a management position in a limited liability company (i.e. I own 15 % or, along with family members, a minimum of 30 % of the share capital or votes).

☐ I work in a limited liability company that I own (i.e. alone or together with family members, I own 50% of the share capital or votes)

☐ I work in another corporation with a similar number of votes

The person is in a management position in the company if he/she is the Managing Director or Board member in a limited liability company or if he/she holds a similar postition in another company or corporation. A family member is considered to be a spouse of the person working in the company and a person who is a parent or child of the person working in the company and who lives in the same household.

LETTER OF SUPERVISORY AUTHORITY FOR KOPIOSTO COPYRIGHT ORGANISATION

☐ I grant UJF the authorities stated in the provided letter of authorisation in the capacity intended by my title. ☐ I am not granting a letter of authorisation.

SIGNATURES	**COLLECTION AGREEMENT**
Applicant Application date Signature	An agreement between the employee and employer regarding the collection and forwarding of union membership fees (Union membership fee and Unemployment Fund payment) to the Union
UJF membership association**	Member's signature Date
Date of approval** Signature of secretary/authorised person	Employer's signature Date
Union Date of approval Initial date of membership *	Clarification of name
Unemployment Fund for Journalists Date of approval Initial date of membership *	Collection will begin on * Payments will be paid to Sampo 800012 - 83674

On behalf of the Union ☐ the collection agreement has been sent to the employer/shop steward

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