



Do not skip this page!

**IT'S TIME TO
UPDATE
YOUR
INFORMATION!**

We need information. Your information to be exact. We try hard to stay in touch with you, but you have to help us. We need all of the contact information requested on the coupon below.

We'd also like to know whether you are presently a provisional, permanent or non-competitive employee, your title and any underlying permanent title you may hold, if you are cur-

rently a provisional.

We are also asking you for your Employee Identification Number. If you do not know your Employee ID number, please ask your personnel office. So, please don't skip this page. Fill out the coupon below and mail or fax it back to the union.

OSA MEMBER INFORMATION UPDATE

Mail to: OSA, 220 East 23rd Street, Suite 707, New York NY 10010 or Fax to: (212) 686-1231

Print Name _____ Agency _____

Date of Birth _____ Social Security No. _____

Home Address _____ City/State _____ Zip _____

Office Phone No. _____ Home Phone No. _____

Cell Phone No. _____ Employee ID No.: _____

E-Mail Address _____

I am a:

	Provisional	Permanent
Staff Analyst Trainee	<input type="checkbox"/>	<input type="checkbox"/>
Staff Analyst	<input type="checkbox"/>	<input type="checkbox"/>
Associate Staff Analyst	<input type="checkbox"/>	<input type="checkbox"/>
Administrative Staff Analyst	<input type="checkbox"/>	<input type="checkbox"/>

Other Title (specify) _____

Non-Competitive Title (HHC): _____