

HEERA REPRESENTATION PETITION

DO NOT WRITE IN THIS SPACE: Case No.:		Dated Filed:	
INSTRUCTIONS: A request for recognition or intervention is to be filed with the appropriate Higher Education employer. A petition for certification must be filed with the appropriate PERB regional office. Proper filing includes concurrent service and proof of service of the HEERA Representation Petition as required by PERB regulations 51030, 51040 and 51100. Attach additional sheets if more space is required.			
1. EMPLOYER (Name, address and telephone number)	Employer's agent to be contacted:		
	Title:		
	Address and telepho	one, if different:	
Ext.			
		Ext.	
2. TYPE OF PETITION (Check all that apply) DATE FILED:		3. PROOF OF SUPPORT	
REQUEST FOR RECOGNITION (RR) PETITION FOR CERTIFICATION (PC)		Filed with: PERB Third Party*	
INTERVENTION SEVERANCE (Filed as PC)		Majority support 30% support 10% support	
SEVERANCE (Filed as RR)		*Attach name, address & telephone number of third party, if applicable.	
4. DESCRIPTION OF PROPOSED UNIT (Including class code and geographic location if other than a statewide unit is proposed)		5. NUMBER OF EMPLOYEES IN PROPOSED UNIT:	
other than a statewide unit is p	Toposed)	UNIT.	
Shall INCLUDE:		6. IF A CURRENT MEMORANDUM OF	
		UNDERSTANDING (MOU) EXISTS COVERING ANY EMPLOYEES PETITIONED FOR, INDICATE:	
		MOU EFFECTIVE DATE:	
		MOU EXPIRATION DATE:	
Shall EXCLUDE:		NO AGREEMENT IS IN EFFECT	
		NO AOREEMENT IS IN LITLET	
 ORGANIZATION(S) RECOGNIZED OR CERTIFIED AS THE EXCLUSIVE REPRESENTATIVE OF OR KNOWN TO HAVE AN INTEREST IN REPRESENTING ANY OF THE EMPLOYEES COVERED BY THIS PETITION: 			
Name of Organization	Address	<u>Date of Recognition/</u> <u>Certification (if any)</u>	
8. PETITIONER (Name, address and telephone number)	Petitioner's agent to be contacted: Title:		
Ent	Address ar	nd telephone, if different:	
Ext.			
		Ext.	
DECLARATION			
I declare that the statements herein are true to the best of my knowledge and belief.			
PETITIONER'S AUTHORIZED REPRESENTATIVE: (Signature)			
Title:			
		Date:	
Los Angeles Regional Office 425 W. Broadway, Suite 400	San Francisco Regional Office 1515 Clay Street, Suite 2206		
Glendale, CA 91204 (818) 551-2822	Oakland, CA 94612-1403 (510) 622-1016		

NOTICE OF REQUEST FOR RECOGNITION

PERB CASE NUMBER:

DATE NOTICE WAS POSTED:

ON		, THE
	(Date)	
RECH	EIVED FI	ROM

(Employer)

(Employee Organization)

A REQUEST TO BE RECOGNIZED AS THE EXCLUSIVE REPRESENTATIVE OF EMPLOYEES IN THE UNIT DESCRIBED ON THE HEERA REPRESENTATION PETITION. THE REQUEST IS BASED ON THE CLAIM THAT A MAJORITY OF THE EMPLOYEES IN THE PROPOSED UNIT WISH TO BE REPRESENTED BY THE ABOVE NAMED EMPLOYEE ORGANIZATION.

NOTICE IS HEREBY GIVEN THAT ANY OTHER EMPLOYEE ORGANIZATION DESIRING TO REPRESENT ANY OF THE EMPLOYEES IN THE UNIT DESCRIBED IN THIS REQUEST FOR RECOGNITION HAS THE RIGHT, WITHIN 15 WORKDAYS FOLLOWING THE DATE OF POSTING OF THIS NOTICE, TO FILE WITH THE EMPLOYER AN INTERVENTION SUPPORTED BY AT LEAST 30% OR AT LEAST 10% OF THE EMPLOYEES IN THE UNIT REQUESTED OR OF THE EMPLOYEES IN A UNIT CLAIMED TO BE APPROPRIATE.

THE LAST DATE FOR FILING AN INTERVENTION IS:

SEE THE HEERA REPRESENTATION PETITION FOR THE NAMES, ADDRESSES AND TELEPHONE NUMBERS OF THE EMPLOYER, THE INCUMBENT EXCLUSIVE REPRESENTATIVE (IF ANY), AND THE PETITIONER.

THIS NOTICE MUST REMAIN POSTED UNTIL:

BY:

(SIGNATURE OF EMPLOYER'S AUTHORIZED AGENT)

PERB Regulation 51035 requires that this Notice be conspicuously posted on all employee bulletin boards in each facility of the employer in which members of the proposed unit are employed. The Notice should be posted as soon as possible but in no event later than 10 days following receipt of the petition. The Notice must remain posted for at least 15 workdays.