



PUBLIC EMPLOYMENT RELATIONS COMMISSION

112 Henry Street NE, Suite 300, Olympia WA 98506

PO Box 40919, Olympia WA 98504-0919

Phone: 360.570.7300 | Fax: 360.570.7334

Email: filing@perc.wa.gov | Web: www.perc.wa.gov

REPRESENTATION PETITION

Amended Petition in Case # _____

Applicable Rules: Chapters 10-08, 391-08 and 391-25 WAC

PARTIES Include information for all parties involved.

EMPLOYER Central Washington University
Contact JoAnn Hundtoft
Address 400 East University
City, State, ZIP Ellensburg WA 98926
Telephone (509) 963-1462 Ext. _____
Email joann.hundtoft@cwu.edu

PETITIONER Public School Employees of Washington
Contact Shannon Sehlin
Address 602 West Main
City, State, ZIP Auburn WA 98001
Telephone (253) 380-5132 Ext. _____
Email ssehlin@pseofwa.org

CURRENT BARGAINING REPRESENTATIVE
(If one exists) _____
Contact _____
Address _____
City, State, ZIP _____
Telephone _____ Ext. _____
Email _____

TYPE OF REQUEST Select One. The petitioner requests:

- RECOGNITION** to be certified as the representative of employees currently unrepresented.
- CHANGE OF REPRESENTATIVE** to be certified as the representative of employees currently represented by another organization.
- DECERTIFICATION** to no longer be represented by the current organization.
- INCLUSION OF UNREPRESENTED EMPLOYEES** to have a group of employees added to an existing bargaining unit as described in WAC 391-25-440.
- EMPLOYER PETITION** a determination by the commission according to WAC 391-25-090.

BARGAINING UNIT

Description of Bargaining Unit: Indicate inclusions / exclusions

All full time and regular part-time employees of Central Washington University in the job classification of Early Childhood Specialist, excluding supervisors, confidential employees, and all other employees.

Department or Division Early Childhood Specialists

Number of Employees in Unit 10

Collective Bargaining Agreement

If one exists, the bargaining unit's most recent collective bargaining agreement must be filed with this petition.

Contract Expiration Date: _____

OTHER RELEVANT FACTS

Additional information relating to the proposed bargaining unit is attached.

SHOWING OF INTEREST

The petition must be filed with a showing of interest indicating support of at least 30% of the employees in the bargaining unit. The showing of interest cards are confidential and are ONLY filed with PERC.

AUTHORIZED SIGNATURE FOR PETITIONER

Print Name Shannon Sehlin Telephone (253) 380-5132 Ext. _____
Title Lead Organizer Email ssehlin@pseofwa.org
Address 602 West Main
City, State, ZIP Auburn WA 98001 Signature *Shannon Sehlin* Date 12/4/17

BEFORE THE PUBLIC EMPLOYMENT RELATIONS COMMISSION
STATE OF WASHINGTON

Public School Employees of WA

Petitioner/Complainant/Filing Party

v.

Central Washington University

Respondent/Responding Party

Case Number

CERTIFICATE OF SERVICE

I certify that I served a copy of this *(title of document)* Representation Petition
on all parties or their counsel of record on Dec 4, 2017

To:	Name	JoAnn Hundtoft	<input type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Organization	Central Washington University	<input type="checkbox"/> Fax	<input checked="" type="checkbox"/> Certified U.S. Mail
	Address	400 East University	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	City, State, ZIP	Ellensburg WA 98926		
	Email	joann.hundtoft@cwu.edu		
	Fax			
	Name		<input type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Organization		<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	Address		<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	City, State, ZIP			
	Email			
	Fax			
	Name		<input type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Organization		<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	Address		<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	City, State, ZIP			
	Email			
	Fax			

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Date signed and submitted Dec 4, 2017

Print Name Shannon Sehlin

Signature 

From: [Shannon Sehlin](#)
To: [PERC, Filing \(PERC\)](#)
Subject: Representation Petition
Date: Monday, December 4, 2017 3:56:51 PM
Attachments: CWU Childcare Petition.pdf
CWU Childcare Authorization Card.pdf
Central Washington University CBA.pdf
CWU Certificate of Service.pdf

Please see the attached representation petition

Shannon Sehlin

Lead Organizer



Only a fool would try to deprive working men and working women of their right to join the union of their choice.

Dwight D. Eisenhower.