



**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** Shoreline School District  
 Contact Bailey Bertram  
 Address 18560 1st Ave N.E.  
 City, State, ZIP Shoreline Washington 98155  
 Telephone (206) 393-4114 Ext. \_\_\_\_\_  
 Email bailey.bertram@shorelineschools.org

**PETITIONER** Public School Employees of WA  
 Contact Shannon Sehlin  
 Address 602 West Main  
 City, State, ZIP Auburn WA 98001  
 Telephone (252) 876-7449 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 classified full-time and regular part time employees employed by the Shoreline School District in the Head Start program, excluding supervisors, confidential employees, and Shoreline School District employees represented by another bargaining unit.

**Department or Division** HEAD START  
**Number of Employees in Unit** 17  
**Collective Bargaining Agreement**  
 If one exists, the bargaining unit's most recent collective bargaining agreement must be filed with this petition.  
**Contract Expiration Date:** N/A


**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)876-7449 Ext. \_\_\_\_\_  
**Title** Lead Organizer **Email** ssehlin@pseofwa.org  
**Address** 602 West Main  
**City, State, ZIP** Auburn Washington 98001 **Signature**  **Date** 3/7/18

**From:** [Shannon Sehlin](#)  
**To:** [PERC, Filing \(PERC\)](#)  
**Subject:** Shoreline Head Start  
**Date:** Tuesday, March 6, 2018 9:06:18 AM  
**Attachments:** Shoreline Head Start Authorization Cards.pdf  
Shoreline Head Start PERC Petition.pdf

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Please see attached Petition for representation

*Shannon Sehlin*  
*PSE Lead Organizer*

