



# REPRESENTATION PETITION

Is this an amended petition?  Yes  No If yes, enter the case number: \_\_\_\_\_

**PARTIES** Include information for all parties involved.

**EMPLOYER** University of Washington

Contact Banks Evans

Title Asst. VP, Human Resources

Address 4300 Roosevelt Way NE

City, State, ZIP Seattle, WA 98105

Telephone 206-221-4465 Ext. \_\_\_\_\_

Email bankse@uw.edu

**PETITIONER** SEIU Local 925

Contact Sarah Bright

Title Organizing Director

Address 1914 N. 34th St. Suite 100

City, State, ZIP Seattle, WA 98103

Telephone 206-322-3010 Ext. 322

Email brights@seiu925.org

**CURRENT BARGAINING REPRESENTATIVE**

If one exists n/a

Contact \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Telephone \_\_\_\_\_ Ext. \_\_\_\_\_

Email \_\_\_\_\_

**TYPE OF REQUEST** Select ONE of the following.

- RECOGNITION** to be certified as the representative of employees currently unrepresented.
- INCLUSION OF UNREPRESENTED EMPLOYEES** to have a group of employees added to an existing bargaining unit as described in WAC 391-25-440.
- 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.
- EMPLOYER PETITION** a determination by the commission according to WAC 391-25-090.

**BARGAINING UNIT**

**Department or Division** UW Library System

**Number of Employees in Bargaining Unit** 34

**Describe the existing or proposed bargaining unit:**

All full time and regular part time Supervisory Professional Staff and Librarians exempt from Chapter 41.06 RCW employed by the University of Washington working within the University of Washington Library System.

**Collective Bargaining Agreement (CBA):**

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

**CBA Expiration Date** n/a

**SHOWING OF INTEREST** The showing of interest cards are confidential and are filed ONLY with PERC.


The petition must be filed with a showing of interest indicating support of at least 30 percent of the employees in the bargaining unit. Showing of interest cards may be submitted electronically, provided the copy is legible.

**AUTHORIZED CONTACT FOR PETITIONER**

Name Sarah Bright Title Organizing Director

Address 1914 N. 34th St. Suite 100 City, State, ZIP Seattle, WA 98103

Telephone 206-322-3010 Ext. 322 Email sbright@seiu925.org

Signature  Date 11/24/2020

**BEFORE THE PUBLIC EMPLOYMENT RELATIONS COMMISSION  
STATE OF WASHINGTON**

SEIU Local 925

Petitioner/Complainant/Filing Party

v.

University of Washington

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 *(date)* 11/24/2020

To:	Name	Banks Evans			
	Organization	University of Washington	<input checked="" type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail	
	Address	4300 Roosevelt Way NE	<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail	
	City, State, ZIP	Seattle, WA 98105	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail	
	Email	bankse@uw.edu			
	Fax				
To:	Name				
	Organization		<input type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail	
	Address		<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail	
	City, State, ZIP		<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail	
	Email				
	Fax				
To:	Name				
	Organization		<input type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail	
	Address		<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail	
	City, State, ZIP		<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail	
	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 11/24/2020

Print Name Sarah Bright

Signature 



**From:** [Sarah Bright](#)  
**To:** [PERC, Filing \(PERC\)](#)  
**Cc:** [de la Rosa, Dario \(PERC\)](#); [Karen Hart](#)  
**Subject:** Representation Petition  
**Date:** Tuesday, November 24, 2020 11:47:42 AM  
**Attachments:** supe packet for PERC.pdf

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Hello,

Attached please find a Representation Petition, membership cards, and a Certificate of Service.

Thank you,

Sarah Bright  
she/her/hers  
Organizing Director  
SEIU Local 925  
Cell: 253-297-9149  
Office: 206-322-3010 x322  
Email: [sbright@seiu925.org](mailto:sbright@seiu925.org)

“Life is a hard battle anyway. If we laugh and sing a little as we fight the good fight of freedom, it makes it all go easier. I will not allow my life’s light to be determined by the darkness around me.”

-Sojourner Truth