



EERA REPRESENTATION PETITION

DO NOT WRITE IN THIS SPACE: Case No.:

Date Filed:

INSTRUCTIONS: A request for recognition, severance request or intervention is to be filed with the employer. Proper filing includes concurrent service and proof of service of the request/severance/intervention as required by PERB Regulations 33050 and 33070. Attach additional sheets if more space is required.

1. EMPLOYER (Name, address and telephone number)

Employer's agent to be contacted: Raquel Rose

Kentfield School District

Title: Superintendent

750 College Avenue

Address and telephone, if different:

Kentfield, CA 94904

rrose@kentfieldschools.org

(415) 458-5130 Ext. _____

(_____) Ext. _____

2. TYPE OF PETITION (Check one)

- REQUEST FOR RECOGNITION
- SEVERANCE REQUEST
- INTERVENTION

3. PROOF OF SUPPORT (Check one)

- Majority support filed with PERB
- At least 30 percent support filed with PERB

4. DESCRIPTION OF PROPOSED UNIT

Shall Include:

All classified, non-certificated, unit members of the Kentfield School District

Shall Exclude:

Management, supervisory and confidential personnel.

5. IF A CURRENT WRITTEN AGREEMENT EXISTS COVERING EMPLOYEES IN THE PROPOSED UNIT, INDICATE :

AGREEMENT EFFECTIVE DATE:

AGREEMENT EXPIRATION DATE:

- NO AGREEMENT IS IN EFFECT.

6. NUMBER OF EMPLOYEES IN PROPOSED UNIT:

36

7. 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

Date of Recognition Certification (if any)

Kentfield Education Support Professionals

4300 Redwood Hwy, Unit 200

Association/CTA/NEA

San Rafael, CA 94903

8. PETITIONER (Name, address and telephone number)

Petitioner's agent to be contacted: Christopher Brunette

Kentfield Education Support Professionals Association/CTA/NEA

Title: CTA Regional UniServ Staff

4300 Redwood Highway, Unit 200

Address and telephone, if different:

San Rafael, CA 94903

cbrunette@cta.org

(415) 909-9560 Ext. _____

(_____) Ext. _____

DECLARATION

I declare that the statements herein are true to the best of my knowledge and belief.

PETITIONER'S AUTHORIZED REPRESENTATIVE: Christy Bitt

(Signature)

Title: CTA Regional UniServ Staff

Date: 03/18/2021

Los Angeles Regional Office
700 N. Central Ave., Suite 200
Glendale, CA 91203-3219
(818) 551-2822

Sacramento Regional Office
1031 18th Street, Room 102
Sacramento, CA 95811-4124
(916) 322-3198

San Francisco Regional Office
1330 Broadway, Ste 1532
Oakland, CA 94612-2514
(510) 622-1016

NOTICE OF EERA REPRESENTATION PETITION

PERB CASE NUMBER: SF-RR-1019-E DATE NOTICE WAS POSTED: 3.26.21

ON 3/18/21
(Date), THE PETITION INDICATED BELOW WAS FILED WITH THE

EMPLOYER BY THE PETITIONER SHOWN ON THE EERA REPRESENTATION PETITION.

- REQUEST FOR RECOGNITION
- SEVERANCE REQUEST
- INTERVENTION

THE PETITION IS BASED ON THE CLAIM THAT (CHECK ONE) A MAJORITY AT LEAST 30% OF THE PROPOSED UNIT WISH TO BE REPRESENTED BY THE PETITIONER.

NOTICE - REQUEST FOR RECOGNITION/SEVERANCE ONLY: EXCEPT AS PROVIDED BY PERB REGULATION 33700(C), ANY OTHER EMPLOYEE ORGANIZATION DESIRING TO REPRESENT ANY OF THE EMPLOYEES IN THE UNIT DESCRIBED IN THIS REQUEST FOR RECOGNITION/ SEVERANCE REQUEST HAS THE RIGHT, WITHIN 15 WORKDAYS FOLLOWING THE DATE OF THIS NOTICE, TO FILE WITH THE EMPLOYER AN INTERVENTION SUPPORTED BY AT LEAST 30% OF THE EMPLOYEES IN A UNIT CLAIMED TO BE APPROPRIATE. THE LAST DATE FOR FILING AN INTERVENTION IS: 4/8/21.

SEE THE EERA 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: April 23, 2021.

BY: 
(SIGNATURE OF EMPLOYER'S AUTHORIZED AGENT)

PERB Regulations 33060 and 33080 require 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.

PROOF OF SERVICE

I declare that I am a resident of or employed in the County of Marin,

State of California. I am over the age of 18 years. The name and address of my

Residence or business is California Teachers Association

4300 Redwood Highway, Suite 200, San Rafael, CA 94903.

On 03/18/2021, I served the EERA Representation Petition
(Date) (Description of document(s))

_____ in Case No. _____
(Description of document(s) continued) (PERB Case No.)

on the parties listed below by (check the applicable method(s)):

placing a true copy thereof enclosed in a sealed envelope for collection and delivery by the United States Postal Service or private delivery service following ordinary business practices with postage or other costs prepaid;

personal delivery;

facsimile transmission in accordance with the requirements of PERB Regulations 32090 and 32135(d).

electronic service (e-mail) - I served a copy of the above-listed document(s) by transmitting via electronic mail (e-mail) to the electronic service address(es) listed below on the date indicated. (May be used only if the party being served has filed and served a notice consenting to electronic service or has electronically filed a document with the Board. See PERB Regulation 32140(b).)

(Include here the name, address, e-mail address and/or fax number of the Respondent and/or any other parties served.)

PERB
San Francisco Regional Office
1330 Broadway, Suite 1532
Oakland, CA 94612-2514
PERBe-file.SFRO@perb.ca.gov

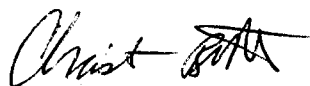
Raquel Rose
Superintendent
Kentfield School District
750 College Avenue
Kentfield, CA 94904
rrose@kentfieldschools.org

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration was executed on 03/18/2021, at
(Date)

San Rafael CA
(City) (State)

Christopher Brunette

(Type or print name)



(Signature)