



STATE OF RHODE ISLAND  
RI STATE LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE	
Case No. <b>3740</b>	Date Filed
EE-	LABOR RELATIONS BOARD

IN THE MATTER OF  
Paul Cuffee School  
  
EMPLOYER  
  
-AND-  
  
NEARI  
  
EMPLOYEE REPRESENTATIVE

AMENDED - 1 A 9:11  
PETITION FOR INVESTIGATION OF  
CONTROVERSIES AS TO  
REPRESENTATION  
PURSUANT TO R.I.G.L. 28-7-16  
RI STATE LABOR RELATIONS ACT

FILE AN ORIGINAL, SIGNED IN BLUE INK, WITH THE BOARD. THIS FORM MUST BE TYPED

- Type of Petition (Check one)
  - Petition by or on behalf of employees seeking **certification** of any Employee Organization.
  - Petition by Employer seeking to resolve **claim of representation** by one or more Employee Organizations.
- Name of Employer: PAUL CUFFEE SCHOOL  
 Address: 459 PROMENADE STREET, PROVIDENCE, RHODE ISLAND 02908  
 Representative (if known): CHRISTOPHER HASKINS Telephone Number: 453-2626
- Name of Employee Organization: NEARI  
 Address: 99 BALD HILL ROAD, CRANSTON, RI 02920  
 Telephone Number: 463-9630 Facsimile: \_\_\_\_\_ Email: pcrowley@neari.org
- Unit Involved – List the specific titles of the positions to be included in proposed unit and attach a copy of job descriptions, if available. (Attach additional sheets if necessary)  
 Included: All certified teachers, school nurse teachers, social workers & speech language pathologists  
Head of school, Deans, Directors, Principals, Human Resource Coordinator, Admissions Coordinator,  
 Excluded: Business Manager, Maintenance Staff, Administrative Staff, and Teaching Partners
- Number of employees in unit sought: 79  
 A. If the Petitioner seeks to represent a unit of employees who are **currently represented** for the purpose of collective bargaining, is the petition filed within the thirty (30) day "window period" as outlined in R.I.G.L. 28-7-9?  
 YES  NO  N/A  
 B. Recognized or certified bargaining agent (Incumbent Labor Organization):  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 If certified, give Certification Number: \_\_\_\_\_ Date Certified: \_\_\_\_\_  
 Current Certification of Representatives:  Attached:   
 Expiration Date of most recent Collective Bargaining Agreement: \_\_\_\_\_  
 Month/Day/Year
- List other Employee Organizations known to have an interest in the employees previously described.  
 Name(s): \_\_\_\_\_  
 Address(es): \_\_\_\_\_

**Note: Upon submission of this Petition for either Representation or Decertification, Cards of Interest with a showing of at least thirty percent (30%), must accompany this Petition. Only Cards of Interest with original signatures shall be accepted.**

Pursuant to R.I.G.L. 28-7-16, the undersigned requests that the Rhode Island State Labor Relations Board investigate the question or controversy of representation of employees, and certify to all persons concerned the name(s) of the representatives who have been designated or selected by said employees.

PETITIONER:  DATE: June 1, 2016  
 SIGNATURE  
 Name: Patrick Crowley Title: Assistant Executive Director  
 Address: 99 Bald Hill Road, Cranston, Rhode Island 02920  
 Telephone: 463-9630 Cellular No. 305-0150  
 Facsimile: \_\_\_\_\_ Email: pcrowley@neari.org