



STATE OF RHODE ISLAND
RI STATE LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE	
Case No.	Date Filed
EE-	

IN THE MATTER OF

-AND- EMPLOYER

EMPLOYEE REPRESENTATIVE

AMENDED
PETITION FOR DECERTIFICATION OF A
CERTIFIED BARGAINING
REPRESENTATIVE
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

1. Type of Petition (Check one)
 Petition by or on behalf of **Employees** seeking Decertification from an Employee Organization.
 Petition by **Intervener** seeking Certification of Representatives through the Decertification process.
 Petition by **Employer** seeking Decertification of an existing Employee Organization.

2. Name of Employer: _____
 Address: _____
 Representative: _____ Telephone Number: _____ Email: _____

3. Name of Employee Organization: _____
 Address: _____
 Representative: _____ Telephone Number: _____ Email: _____

4. List other Employee Organization(s) known to have an interest in the employees previously described, if applicable.
 Name of Employee Organization: _____
 Address: _____
 Representative: _____ Telephone Number: _____ Email: _____

5. Composition of Current Certified Unit for Decertification – **(Attach additional sheets if necessary).**

Included _____

Exclude: _____

6. Number of total employees in current unit: _____
 Certification Number: _____ Date Certified: _____
 Current Certification of Representatives: Attached: Unit Clarification Disposition Form: Attached:
 Expiration Date of most recent Collective Bargaining Agreement: _____
 Month/Day/Year

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

The undersigned hereby certifies that this Petition for Decertification is being filed in compliance with the requirements of R.I.G.L. §28-7-16 and in accordance with the Board's Rules and Regulations, 465-RICR-10-00-1-1.15.

PETITIONER'S SIGNATURE: _____ **DATE:** _____
 Name: _____ Title: _____
 Address: _____
 Business Telephone: _____ Cellular No.: _____
 Facsimile: _____ Email: _____