



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

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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: \_\_\_\_\_