

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

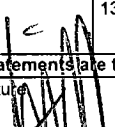
02-RC-227006

Date Filed

9-7-18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: The New School		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 72 5th Avenue, New York, NY 10011	
3a. Employer Representative - Name and Title: Keila Tennent		3b. Address (if same as 2b - state same): 80 5th Avenue, New York, NY 10011	
3c. Tel. No. 212-229-5432	3d. Cell No.	3e. Fax No.	3f. E-Mail Address tennentk@newschool.edu
4a. Type of Establishment (Factory, mine, wholesaler, etc.) University		4b. Principal Product or Service Higher Education	
5a. City and State where unit is located: New York City, NY		5b. Description of Unit Involved: Included: Student Healthcare Services Providers- please see attached list Excluded:	
6a. Number of Employees in Unit: 19		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) <u>September 4, 2018</u> and Employer declined recognition on or about (Date) <u>no decision made</u> (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (If none, so state) None		8b. Address: None	
8c. Tel. No. None	8d. Cell No. None	8e. Fax No. None	8f. E-Mail Address None
8g. Affiliation, if any: N/A		8h. Date of Recognition or Certification N/A	
8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) None		8j. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Is there now a strike or picketing at the Employer's establishment(s) involved? <u>No</u> <input checked="" type="checkbox"/> If so, approximately how many employees are participating? (Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None			
10a. Name None		10b. Address None	
10c. Tel. No. None		10d. Cell No. None	
10e. Fax No. None		10f. E-Mail Address None	
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election: We would prefer an in-person election at the worksite			
11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail			
11b. Election Date(s): September 24, 2018		11c. Election Time(s): 9 am - 5pm	
11d. Election Location(s): 80 5th Avenue, 3rd Floor, NY, NY 10011		11e. Election Date(s): September 24, 2018	
12a. Full Name of Petitioner (including local name and number): Intl. Union United Auto Workers and Local 7902		12b. Address (street and number, city, State and ZIP code): 256 W. 38th Street, Suite 702, New York, NY 10018	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): International Union United Automobile, Aerospace and Agricultural Implement Workers of America			
12d. Tel. No. 212-529-2580	12e. Cell No. N/A	12f. Fax No. 212-529-1986	12g. E-Mail Address ahammersmith@uaw.net
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Emily Barnett		13b. Address (street and number, city, State and ZIP code): 256 W. 38th Street, Suite 702, New York, NY 10018	
13c. Tel. No. 212-432-2120	13d. Cell No.	13e. Fax No.	13f. E-Mail Address uaw7902@gmail.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Amy Hammersmith	Signature 		Title International Servicing Represen
			Date 09/07/18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
REVISED RC PETITION

DO NOT WRITE IN THIS SPACE

Case No
02-RC-228305Date Filed
9/28/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer:
Special Citizens Futures Unlimited

2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):
Please see attached.

3a. Employer Representative - Name and Title:
Jessica Zufall-Guberman (CEO)

3b. Address (if same as 2b - state same):
1775 Grand Concourse
Bronx, NY

3c. Tel. No.
718-885-4630

3d. Cell No.

3e. Fax No.
917-801-0321

3f. E-Mail Address
Jessica.guberman@specialcitizens.org

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Residential & day programs

4b. Principal Product or Service
residential & habilitative services

5a. City and State where unit is located:
Bronx, NY

5b. Description of Unit Involved:
Included:
Please see attached.

6a. Number of Employees in Unit:
120

Excluded:
Please see attached.

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? ☒ Yes ☐ No

Check One: ☐ **7a. Request for recognition as Bargaining Representative was made on (Date)** _____ and Employer declined recognition on or about (Date) _____ (If no reply received, so state).
☐ **7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.**

8a. Name of Recognized or Certified Bargaining Agent (if none, so state)
None

8b. Address:

8c. Tel. No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any:

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____
(Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
None

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election:

11a. Election Type:

☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
Please see attached

11c. Election Time(s):
Please see attached

11d. Election Location(s):
Please see attached

12a. Full Name of Petitioner (including local name and number):
Local 888, United Food and Commercial Workers Union

12b. Address (street and number, city, State and ZIP code):
160 East Union Avenue
East Rutherford, NJ 07073

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
United Food and Commercial Workers International Union

12d. Tel. No.
(914) 668-8881

12e. Cell No.

12f. Fax No.
(914) 668-8480

12g. E-Mail Address

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title:
Steven H. Kern, Attorney

13b. Address (street and number, city, State and ZIP code):
Barnes, Iaccarino & Shepherd, LLP 258 Saw Mill River Road,
Elmsford, NY 10523

13c. Tel. No.
(914) 592-1515

13d. Cell No.

13e. Fax No.
(914) 592-3213

13f. E-Mail Address
skern@bislawfirm.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)
Steven H. Kern

Signature

Title
Attorney

Date
09/28/18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
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