VERMONT LABOR RELATIONS BOARD

UNIT CLARIFICATION PETITION

**Description:** *A petition for clarification of an existing bargaining unit or units may be filed by a collective bargaining representative or an employer where no question concerning the majority status of the exclusive bargaining representative is pending at the time the unit clarification petition is filed. Such a petition may be filed where 1) there is a dispute over the unit inclusion or exclusion of employee(s), or 2) there has been an accretion to, or reorganization of, the workforce, or 3) the collective bargaining representative or employer seeks a reorganization of the existing structure of a bargaining unit or units. For further information click on the “Bargaining Units and Elections” link on our home page.*

**Instructions:** *Submit the petition to the Vermont Labor Relations Board (Mailing address: 6 Baldwin Street, Suite 307, Montpelier, Vermont 05633-6101, or by email to* [*Judith.Dillon@vermont.gov*](mailto:Judith.Dillon@vermont.gov)*, or VLRB-Info@vermont.gov). You must also provide a copy of the petition to the other involved party or parties.*

1. Name and address of the employer.

2. Name and address of the collective bargaining representative.

3. Describe in detail the existing bargaining unit and, if the collective bargaining representative has been certified as representative of the employees in the bargaining unit, identify the docket number and date of the certification order.

4. State the composition of the proposed bargaining unit and the reasons why the Petitioner seeks clarification of the unit.

5. The number of employees in the present bargaining unit and in the unit proposed under the clarification.

6. State the names and addresses of any other individuals or employee organizations who claim to represent any employee affected by the proposed clarification and submit a copy of any collective bargaining agreement covering any such employees.

Dated this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_, at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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(Petitioner and affiliation)

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
(Signature of person filing petition) (Title, if any)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_