

# **NOTICE TO EMPLOYEES**

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## **FROM THE STATE OF FLORIDA PUBLIC EMPLOYEES RELATIONS COMMISSION**

The attached recertification petition has been filed seeking an election to determine whether certain employees desire to continue to be represented by the employee organization for the purpose of collective bargaining. If an election is held, a Notice of Election will be posted giving complete details for voting.

**YOU HAVE THE RIGHT UNDER FLORIDA LAW:**

- To self-organization
- To form, join or assist employee organizations
- To bargain collectively through a chosen representative
- To act together for the purpose of collective bargaining or other mutual aid or protection
- To refrain from any or all such activities

**PUBLIC EMPLOYEES RELATIONS COMMISSION  
4708 Capital Circle Northwest, Suite 300  
Tallahassee, Florida 32303  
850-488-8641**

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**THIS IS AN OFFICIAL GOVERNMENT NOTICE  
AND MUST NOT BE DEFACED.**

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BTU-ESP #295

STATE OF FLORIDA  
PUBLIC EMPLOYEES RELATIONS COMMISSION  
4708 Capital Circle N.W., Suite 300  
Tallahassee, Florida 32303  
(850) 488-8641

Do Not Write in This Box

CASE NUMBER
RC-
DATE FILED

REPRESENTATION-CERTIFICATION PETITION

- Check this box if petition seeks to add classifications to an existing bargaining unit represented by the petitioner ("opt-in"). Certification No. \_\_\_\_\_.
- Check this box if petition is filed pursuant to the recertification requirement in section 447.305(6), Fla. Stat. Certification No. 295.

**INSTRUCTIONS:** Submit the original of this petition to the Public Employees Relations Commission along with proof of simultaneous service upon the other parties. Include a copy of the most recent collective bargaining agreement for the petitioned-for bargaining unit if this petition is being filed for recertification. If more space is required, attach additional sheets numbering items accordingly.

1. NAME OF PETITIONER: Broward Teachers Union, Local 1975, FEA, AFT, NEA, AFL-CIO

Address: 6000 N. University Drive

<u>Tamarac</u>	<u>FL</u>	<u>33321</u>
City	State	Zip Code

2. PETITIONER'S REPRESENTATIVE: Anna Fusco

Title: President Email Address: afusco@btuonline.com

Phone No. 954-486-6250 Fax No. 954-739-1803

Address: 6000 N. University Drive

<u>Tamarac</u>	<u>FL</u>	<u>33321</u>
City	State	Zip Code

3. PERC REGISTRATION NUMBER: OR-2016-018 Expiration Date: May 1, 2025

4. NAME OF EMPLOYER: School Board of Broward County, Florida

Address: 600 S.E. Third Avenue

<u>Fort Lauderdale</u>	<u>FL</u>	<u>33301</u>
City	State	Zip Code

5. EMPLOYER'S REPRESENTATIVE: Dr. Howard Hepburn

Title: Superintendent Email Address: Howard.Hepburn@browardschools.com

Phone No. 754-321-2600 Fax No. 754-321-2701

Address: 600 S.E. Third Avenue

<u>Fort Lauderdale</u>	<u>FL</u>	<u>33301</u>
City	State	Zip Code

6. **Description of bargaining unit** proposed to be appropriate for the purpose of collective bargaining. (List individually all job classifications proposed for inclusion. If more space is needed, attach additional pages.)

**INCLUDED** (list classifications below):

See Attached

**EXCLUDED** (list classifications below):

See Attached

7. APPROXIMATE NUMBER OF EMPLOYEES in the unit claimed to be appropriate: 2955

8. Total number of showing of interest statements signed and dated by employees in the proposed unit are: 1825

9. Is this petition accompanied by the original showing of interest consisting of signed and dated statements from 30% or more of the employees in the proposed unit indicating that they desire to be represented for purposes of collective bargaining by the petitioning employee organization?  YES  NO

10. (If opt-in or recertification, skip this question) Name of the CURRENT CERTIFIED BARGAINING AGENT for any of the employees in the proposed unit (if none, so state): \_\_\_\_\_

CERTIFICATION NUMBER: \_\_\_\_\_

UNION REPRESENTATIVE: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

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

City

State

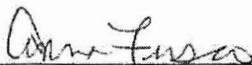
Zip Code

11. Is there an existing collective bargaining contract?

YES (Expiration Date: June /30 /2026). If this is a recertification petition, provide a copy of the current CBA with your filing.

NO (If applicable, provide the date prior CBA expired: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_)

**By my signature below, I affirm that I have read the above petition and all attachments. The statements contained herein are true to the best of my knowledge and belief. A copy of this fully executed form has been served on the other parties identified in items 5 and 10. FALSE STATEMENTS CONTAINED IN THIS FORM MAY RESULT IN FINE AND IMPRISONMENT PURSUANT TO CHAPTER 837, FLORIDA STATUTES.**



Signature of Petitioning Union's Representative

May 3, 2024

Date Signed

**The Commission utilizes e-service as the primary method of delivery for orders, correspondence, and notices. Parties are responsible for ensuring that their email address on file with the Commission is correct and current.**

Included:

All paraprofessional employees employed by the School Board of Broward County, including the positions of

TEACHER AIDE;  
TEACHER ASSISTANTS;  
TUTOR I AND II;  
SOCIAL EDUCATOR;  
COMMUNITY SOCIAL WORKER;  
BRACE ADVISOR;  
JOB COACH;  
HOME VISITOR-HIPPY;  
HOME SERVICE EDUCATOR, EVEN START;  
PARENT EDUCATOR;  
COMMUNITY LIAISON-PIP;  
HEAD START TEACHER AIDE  
HEAD START TEACHER ASSISTANT  
BEHAVIORAL TECHNICIAN  
CERT CLASSROOM ASSISTANTS  
CERT TEACHER ASSISTANTS  
CHILD DEVELOPMENT ASSOCIATE  
CLASSROOM ASSISTANTS  
COMMUNITY LIAISON  
JOB COACH  
JOB COACH-EDUCATIONAL ASSISTANT  
PARENT EDUCATOR  
VOCATIONAL & CAREER ADVISORS

Excluded:

All other employees of the School Board of Broward County.