

## **CONSENT TO REPRESENTATION BY CTA REPRESENTATIVE**

I, \_\_\_\_\_, declare that I am a permanent or probationary certificated employee of the TEMECULA UNIFIED SCHOOL DISTRICT and a member of TEMECULA VALLEY EDUCATORS ASSOCIATION (CTA/NEA), that I have received from the district a notice of recommendation of non-reemployment, and that I have requested a hearing pursuant to Education Code Section 44949. The reasons given for the recommendation for non-reemployment are those set forth in Education Code Section 44955. I understand that similar notices were delivered to other certificated employees of the district and that other employees have also requested a hearing.

I understand that CTA has agreed to provide representation to the entire group or class of certificated employees similarly affected by the district's action.

I hereby consent to and authorize representation at said hearing by PATTI BAILEY a CTA representative. By executing this document, I consent to such representation as a member of TEMECULA VALLEY EDUCATORS ASSOCIATION and CTA and as a member of the group or class similarly affected by the district's action.

In that regard, the undersigned consents to abide by, authorize and ratify all decisions made on behalf of the group or class represented. Such decisions may include, but not be limited to, decisions relating to strategy, the presentation of evidence, continuances of hearing dates, and extensions of notice deadlines.

I acknowledge that I have been advised and understand that relevant issues involved in the hearing may include assignments, qualifications, seniority, and so-called "bumping rights", classification status issues so that real and potential competing and conflicting rights and interests may exist within the group or class represented. I further acknowledge that I have been advised and understand that I may secure independent counsel and representation at my own expense in lieu of that provided by CTA and, further, that I may do so at any time upon notice. I further understand that PATTI BAILEY is not an attorney and the representation provided herein will not be by legal counsel. I have been advised and encouraged to consult with independent legal counsel whenever I wish to do so.

I agree to cooperate fully in the defense of this matter and acknowledge my individual responsibility to promptly request a hearing, to thoroughly read and review all notices served, and to provide all relevant information, including that relating to my seniority and qualifications.

***-FOR CTA MEMBER & CTA STAFF USE-***

I understand that the representation provided herein relates only to the administrative hearing and that it does not include appeal or judicial review.

DATED: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_, CA \_\_\_\_\_

\_\_\_\_\_  
Personal E-mail address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Name of School Site

\_\_\_\_\_  
School Phone #

\_\_\_\_\_  
CTA Membership ID #

## **CONSENT TO LEGAL REPRESENTATION BY A GLS ATTORNEY**

I, \_\_\_\_\_, declare that I am a permanent or probationary certificated employee of the TEMECULA UNIFIED SCHOOL DISTRICT and a member of TEMECULA VALLEY EDUCATORS ASSOCIATION (CTA/NEA). I have received from the district a notice of recommendation of non-reemployment, and have requested a hearing pursuant to Education Code Section 44949. The reasons given for the recommendation for non-reemployment are those set forth in Education Code Section 44955. I understand that similar notices were delivered to other certificated employees of the district and that other employees have also requested a hearing.

I understand that CTA has agreed to provide representation to its members to the extent possible to the entire group or class of certificated employees similarly affected by the district's action.

I hereby consent to and authorize representation at said hearing by Jon Vanderpool, an attorney who participates in the CTA Group Legal Services Program. By executing this document, I understand and consent to such representation as a member of TEMECULA VALLEY EDUCATORS ASSOCIATION and CTA and as a member of the group or class of employees similarly affected by the district's action.

In that regard, I agree to abide by, authorize and ratify all decisions made on behalf of the group or class represented. Such decisions may include, but not be limited to, decisions relating to strategy, the presentation of evidence, continuances of hearing dates, and extensions of notice deadlines.

I acknowledge that I have been advised and understand that relevant issues involved in the hearing include assignments, qualifications, seniority, and so-called "bumping rights", classification status issues so that real and potential competing and conflicting rights and interests may exist within the group or class represented. I further acknowledge that I have been advised and understand that I am free to secure independent counsel and representation at my own expense in lieu of that provided by CTA and, further, that I may do so at any time. I agree that if I do secure independent counsel I will notify my CTA counsel of that fact and recognize that upon that notification my CTA counsel will cease to represent me in the proceedings.

I agree to cooperate fully in the defense of this matter and acknowledge my individual responsibility promptly to request a hearing, to thoroughly read and review all notices served, and to provide all relevant information, including that relating to seniority and qualifications.

***-FOR CTA MEMBER & GLS ATTORNEY USE-***

I understand that the representation provided herein relates only to the administrative hearing and that it does not include appeal or judicial review.

DATED: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_, CA \_\_\_\_\_

\_\_\_\_\_  
Personal E-mail address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Name of School Site

\_\_\_\_\_  
School Phone #

\_\_\_\_\_  
CTA Membership ID#

# NOTICE OF PARTICIPATION

To: Governing Board of Temecula Valley Unified School District  
\_\_\_\_\_ (School Site)

Address: 31350 Rancho Vista Road  
Temecula, California 92592

In response to the District Statement of Reduction in Force, dated \_\_\_\_\_, 20\_\_\_\_,  
I \_\_\_\_\_,

1. Request a hearing.
2. Object to the District Statement of Reduction in Force upon the ground that it does not state acts or omissions upon which you may proceed.
3. Object to the form of the District Statement of Reduction in Force on the ground that it is so indefinite or uncertain that I cannot identify the transaction or prepare my defense.

This constitutes my notice of participation pursuant to Government Code Section 11506.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_ California, \_\_\_\_\_

\_\_\_\_\_  
Date

**-FOR CTA MEMBER USE-**

# REQUEST FOR HEARING

Dear Ray Johnson:

I hereby request a hearing to determine whether there is cause to not re-employ me for the 2017-2018 school year.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_, California\_\_\_\_\_

\_\_\_\_\_  
School Site

\_\_\_\_\_  
Date

***-FOR CTA MEMBER USE-***

# RIF DATA FORM

Date: \_\_\_\_\_

## Personal Information

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Non-work e-mail: \_\_\_\_\_

Mailing address: \_\_\_\_\_

## Employment Status and History

Current employment status (check one):

- Prob 1     Prob 2     Permanent     Temporary     Don't know/unsure

Current position: \_\_\_\_\_

(Example: Teacher, Nurse, Counselor, etc.)

Do you work full time?  Yes     No    If no, what percentage of an FTE do you teach? \_\_\_\_\_%

If applicable, list current grade level(s) and subject(s): \_\_\_\_\_

List any other grade levels and subjects you have taught at **this** District, in reverse chronological order, with approximate dates. If you worked less than full-time, please also list hours per week or percent FTE:

Year(s)	Assignment	Hours per week or FTE %
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## Seniority Date

Seniority date according to the district: \_\_\_\_\_ Seniority number: \_\_\_\_\_

Do you believe your first date of paid probationary service with this District is different from the seniority date listed above? If so:

What do you believe is your first date of paid probationary service? \_\_\_\_\_

Briefly describe the prior service that you performed for the District: \_\_\_\_\_

If you are contesting your seniority date, please attach copies of all your contracts with the District, and also **bring copies with you to the hearing.**

*(see other side)*

Did you work at the District at least 75% of the school year during the year **immediately before** the year of your seniority date according to the District?

Yes    No

If yes, how were you classified by the District?

Temporary    Long term sub    Day to day sub    Other: \_\_\_\_\_

If yes, what were your dates of prior service? \_\_\_\_\_

**Credentials, Certifications and Degrees**

Please list all of your current credentials, authorizations, and certifications, including CLAD and BCLAD:

---

---

Undergraduate major and minor:

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Any post-bachelor's degrees: \_\_\_\_\_

Subject matter and number of any other post-bachelor's units: \_\_\_\_\_

---

**Other**

Are you aware of any employee in the District with **less seniority** than yourself, who is being retained to perform a service that **you are credentialed and qualified** to perform? If so, please list the name(s) of any such person or persons, and seniority date, if known:

---

---

---

Please state any other information you believe may be important to your case:

---

---

---

---