

NOTICE OF DESIRE TO NEGOTIATE
(File a separate notice for each appropriate unit)

Pursuant to Minnesota Statutes 179A.14, you are hereby notified of the undersigned's desire to meet and negotiate an initial or subsequent agreement establishing terms and conditions of employment.

Name of Exclusive Representative: _____ Zip: _____
Address: _____ City: _____ State: _____
Zip: _____ Telephone: _____

Name of Representative: _____
Address: _____ City: _____ State: _____
Zip: _____ Telephone: _____
Cell Phone: _____
Email Address: _____

Name of Employer: _____
Address: _____ City: _____ State: _____
Zip: _____ Telephone: _____

Name of Representative: _____
Address: _____ City: _____ State: _____
Zip: _____ Telephone: _____
Cell Phone: _____
Email Address: _____

Type of Governmental Agency Involved: _____ State _____ County _____ Municipality
_____ University of Minnesota _____ School District _____ Special Board or Commission

Type of Bargaining Unit: (Check one most appropriate)

- | | |
|---|--------------------------------------|
| <u>Education</u> | <u>Law Enforcement/Essential</u> |
| ____ K-12 Teachers | ____ Law Enforcement – Essential |
| ____ AVTI/Other Teachers | ____ Law Enforcement – Non-Essential |
| ____ Teachers' Aides | ____ Fire Fighters/Fire Protection |
| ____ Support Staff, General | ____ Correction Guards |
| ____ Clerical/Office | ____ Professional Engineering |
| ____ Bus Drivers | ____ Supervisory |
| ____ Dietary/Maintenance | ____ Confidential |
| ____ Principals/Assistant Principals | |
| ____ Higher Education-Instructional | <u>Other Public Sector</u> |
| ____ Higher Education-Non-Instructional | ____ Social Services/Welfare |
| | ____ Courthouse/City Hall |
| <u>Health Care</u> | ____ Highway/Public Works/Parks |
| ____ RN's | ____ Public Utility |
| ____ LPN's | ____ Maintenance/Trades |
| ____ Support Staff, General | ____ Clerical/Office |
| ____ Clerical/Office | ____ Technical |
| ____ Technical | ____ Professional |
| ____ Dietary | ____ General Service/Support |
| ____ Maintenance | ____ Wall-to-Wall |
| ____ Professional | ____ Library |
| Other: (Describe) | ____ Liquor Store |
| _____ | ____ General Unit |

Number of employees in unit: _____ Status of employees: _____ Essential _____ Other than essential
Date current contract expires: _____ Check is this a first contract: _____
Date of Notice: _____ Date sent to other party and commissioner: _____
Notice initiated by: _____ Exclusive Representative _____ Employer

Distribution:

1-Commissioner, State Bureau of Mediation Services
1380 Energy Lane, Suite 2, St. Paul, MN 55108
1-Other party to collective bargaining agreement
1-File

Authorized /s/

Title

When properly executed and served upon the commissioner and the other party, this notice satisfies the requirements of Minn. Stat. 179A.14. Failure to provide timely notice may result in financial penalty.