# LABOR ADITIONS OF THE PARTY OF

### UNITED STATES OF AMERICA FEDERAL LABOR RELATIONS AUTHORITY

## Petition for Review of Negotiability Issues For

	FOR FLRA USE ONLY
Case No.	
Date Filed	

Complete instructions are on the back of this form.

#### **Use With Disapproved Provisions**

USE THIS FORM ONLY IF THE UNION IS SEEKING REVIEW OF A PROVISION AGREED TO BY THE UNION AND AGENCY REPRESENTATIVE, THAT HAS BEEN DISAPPROVED BY THE AGENCY HEAD ON REVIEW PURSUANT TO 5 U.S.C.  $\S$  7114(C).

Important Information: This form is to be used to initiate a negotiability proceeding and provide the Agency with notice that the Union requests a decision from the Authority that a specific provision is legal. Section 2424.22 of the Authority 's Regulations requires the Union in the petition for review to, among other things, set out the exact language at issue, explain the meaning of the language, explain how it is intended to operate, explain technical or unusual terms, and provide copies of materials that support the Union 's position.

The information requested below may be provided on this form or in a separately created document. The form is available over the Internet, at www.flra.gov, in a format that can be completed using standard word processing software. If you have questions about completing this form, please contact the Authority 's Case Control Office at (202) 218-7740.

The regulations governing negotiability proceedings are in 5 C.F.R. part 2424, and are available on the Internet at www.flra.gov.

On receipt of the petition for review, a representative of the Authority will schedule a conference concerning this petition. Every effort will be made to conduct this conference by telephone or in perso within ten (10) calendar days of the filing of the petition for review.

1.	Name and address of Petitioning Union:	2.	<b>Union Representative Contact Information:</b>
			Name:
			Title:
			Address (if different from Question 1):
			Phone: Fax:
3.	Name and address of Agency:	4.	<b>Agency Representative Contact Information:</b>
			Name:
			Title:
			Address (if different form Question 3):
			Phone: Fax:
5.	Agency Head or Designee Contact Information:		
	Name/Title:		
	Address (if different from Question 3)		
	Phone: Fax:		

6.	How many provisions are in dispute?
•	120 William provisions are in dispute.
_	XXII 4 41 1 4 641 A XX 1 1 1 1 10
<b>7.</b>	What was the date of the Agency Head disapproval?
	i. Attach a copy of the disapproval.
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8.	Are there or were there a other proceedings concer			al Service Impasses	s Panel (FSIP), or
	Yes <b>G</b>	No <b>G</b>			
8a.	If Yes, which of the follow	ving proceedings	?		
	i. An unfair labor praction	ce charge	Yes	G	No <b>G</b>
	If Yes, explain in detail hor and provide the following:	w the unfair labor	practice charge	is related to this neg	otiability proceeding
	What date was it filed?	What is the statu	s of the case?	What is the case no	umber?
	ii. A proceeding before the	he FSIP	Yes <b>G</b>	No $G$	
	If Yes, explain in detail ho provide the following:	w the proceeding b	pefore FSIP is re	elated to this negotia	bility proceeding and
	What date was it filed?	What is the statu	s of the case?	What is the case no	umber?
	iii. A related petition for	review of negotia	ability issues	Yes <b>G</b>	No <b>G</b>
	If Yes, explain in detail how proceeding and provide the	•	eview of negotia	ability issues is relate	ed to this negotiability
	What date was it filed?	What is the statu	s of the case?	What is the case no	umber?
	iv. A related grievance	,	Yes <b>G</b>	No <b>G</b>	
	If Yes, explain in detail hor following:	w the grievance is	related to this n	egotiability proceedi	ng and provide the
	What date was it filed?	What is the statu	s of the case?	What is the case no	umber?

Alternative Dispute Resolution (ADR)					
The Authority offers ADR services to help parties resolve their negotiability disputes through its Collaborative and Alternative Dispute Resolution Office and Program (CADR). The CADR program provides an alternative to traditional case processing and is available on a voluntary basis. If you are interested in CADR assistance or information regarding any of its services, you may contact the CADR office at (202) 482-6503.					
9. Are you interested in attempting to resolve this matter with the assistance of CADR?					
Yes <b>G</b> No <b>G</b>					
The Provisions					
10. Set out the exact language of all the provisions sought to be declared legal.					
FOR EACH PROVISION, ANSWER QUESTIONS 11 THROUGH 15. MAKE A SEPARATE COPY OF THIS PAGE FOR EACH PROVISION.					
PROVISION					
11. Set out the exact wording of the provision sought to be declared legal.					
12. Explain the meaning of the provision including: any special terms or phrases, technical language, or other words that are not in common usage.					
13. Describe how the provision is intended to work and what impact it will have. Where a provision has previously been included in the parties' collective bargaining agreement, describe how the provision has worked and what impact it had. Where the provision concerns a particular work situation, or other particular circumstances, describe the situation or circumstances that will enable the Authority to understand how each provision is intended to apply.					

14.	I. If the Agency Head has explained the basis of any allegation that the provision is illegal, you may choose to attach a statement describing your legal arguments concerning the legality of these provisions. You may also wait and provide your arguments in response to the Agency's statement of position. If you choose to provide your legal arguments with this petition, you may explain, but not change, those arguments in later filings.					
	For all statements, cite any law, rule, regulation, section of a collective bargaining agreement, or other authority relied on in your argument or referenced in the provision. Attach to this petition a copy of all such material, except you do not have to provide a copy of federal statutes, government-wide regulations, or judicial and administrative decisions.					
	If your statement is more than authorities.	25 pag	es long	, you must inc	clude a table of conte	ents and table of
	Are copies of materials attached	l? <b>Y</b> e	s <b>G</b>		No <b>G</b>	
	If yes, list the materials attached	l:				
15. Do you wish to "sever" any part of the provision? Severing a provision into separate parts makes each part the subject of a separate determination regarding its legality. Severance requires that each part has independent meaning, and should be sought only where you have an interest in determining whether any of the separate parts is legal even if the other part is not.						
	Yes <b>G</b>	G				
15a	. If Yes, specify which provision independent meaning of the s			vered, how it i	is to be severed, and	the

Hearing				
	you believe that a heasented in this case?	aring or other fact finding procedure is necessary to resolve any issues		
Ye	es <b>G</b>	No <b>G</b>		
16a. If	Yes, explain what the	ose issue are and why they require a hearing.		
Respons	sibilities of the Union			
	ing the petition for re ing to any Authority	eview, the Union is responsible for participating in a conference and Order.		
direction informa	n or proceeding unde	nference under section 2424.23 of the Authority's Regulations, a r section 2424.31 or otherwise failure to provide timely or responsive authority Order may result in dismissal of the petition for review. 5		
Checklis	t with Statement of Se	rvice and Signature		
	ments filed with the nority's Regulations.	Authority must comply with the requirements set forth in part 2429 of		
A comple	ete copy (including all	attachments) of a petition for revie <u>wmust</u> :		
	Be served by certified mail, first-class mail, commercial delivery, or in person on: (1) Principle Agency Bargaining Representative at the negotiations; and (2) the Head of the Agency (or designee)			
	Contain a signed and dated statement of service with names and addresses of parties served, date of service, nature of document served, and whether by certified mail or personal delivery. (See example on back page )			
	Contain an original a	nd 4 complete and legible copies of all document s (5 C.F.R. §2429.25)		
	Be addressed to:	Case Control Office, Federal Labor Relations Authority 1400 K St., NW, Suite 201 Washington, D.C. 20424-0001		

# Statement / Certificate of Service to be used by Union in filing a petition for review of negotiability issues.

STATEMENT	OF SERVICE
I certify that a complete copy of the petition for review. <u>UNION and AGENCY</u> were filed with the Case Contr  Washington, D.C., and were sent this day to:	
Agency Principal Bargaining Representative (Title and Mailing Address) (The Principal Bargaining Representative is the individual who signed the Agency allegation.)	
The Head of the Agency (or designee)*/ (Title and Mailing Address)	
Indicate near each name the <b>Method of Service</b>	
Date Name	of filing party
Signatur	re of Union's representative
*/ For example, for components of the U.S. Departme Head") is the Secretary of Defense, or his or her design	ent of Defense, the Head of the Agency (or "Agency