

NOTICE OF PUBLIC SCHOOL EMPLOYER LOCKOUT

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

Employment Relations Commission

INSTRUCTIONS: File an **original** and **4 copies** of this notice (including an affidavit and other attachments pursuant to Rule 423.191-194) with the Employment Relations Commission at the Cadillac Place - 3026 W. Grand Boulevard, Suite 2-750 PO BOX 02988, Detroit, Michigan, 48202-2988, along with proof of service. Serve a copy on the employer named in item 1 by first class mail.

DO NOT WRITE IN THIS SPACE	
Case No.	Date Filed

EMPLOYER ALLEGED TO BE ENGAGED IN LOCKOUT

Area Code & Telephone Number:

1. Name and Address of Employer:

2. Names and Home Addresses of Employer's Governing Board:

3. Date(s) public school employer was allegedly engaged in the lockout:

4. Total number of full or partial days public school employer was allegedly engaged in the lockout as of filing:

5. Is the lockout still in progress? Yes No

6. Name and Address of bargaining representative filing this notice:

Area Code & Telephone Number:
Area Code & Fax Number:

Type of Bargaining Unit (Check One)

- Teachers
 Transportation
 Maintenance
 Food Service
 Other _____

I have read the above notice and it is true to the best of my knowledge and belief.

Print Name _____ Title, if any _____

Signature of bargaining representative filing notice _____ Area Code & Phone No. _____

Address _____ Area Code & Fax No. _____

THE DEPARTMENT OF LICENSING & REGULATORY AFFAIRS WILL NOT DISCRIMINATE AGAINST ANY INDIVIDUAL OR GROUP BECAUSE OF RACE, SEX, RELIGION, AGE, NATIONAL ORIGIN, COLOR, MARITAL STATUS, HANDICAP, OR POLITICAL BELIEFS. IF YOU NEED HELP WITH READING, WRITING, HEARING, ETC., UNDER THE AMERICANS WITH DISABILITIES ACT, YOU MAY MAKE YOUR NEEDS KNOWN TO THIS AGENCY.