



State of New Hampshire
Public Employee Labor Relations Board

Modification Petition

1. **Petitioner:** _____

Representative: _____ Title: _____

Address: _____

E-Mail Address: _____ Telephone: _____

2. **Public Employer:** _____

Representative: _____ Title: _____

Address: _____

E-Mail Address: _____ Telephone: _____

3. **Representative of existing unit, if applicable:**

Name: _____

Address: _____

E-Mail Address: _____ Telephone: _____

4. Current certified bargaining unit description:

5. Date certified or last modified: _____

6. Modification request: _____

7. Explanation of changed circumstances or reason for modification request:

8. The petitioner certifies that the parties have made reasonable efforts to reach agreement on the modification. Following such efforts:

_____ Agreement has been reached; or

_____ Agreement has not been reached

9. Notice to Public Employer:

The public employer shall display copies of the petition at locations where employees of the existing or proposed bargaining unit work on the next working day following receipt of the petition. When it is necessary for a public employer to display copies of the petition at diverse locations because potential bargaining unit employees work at sites remote from the place where the administration of the public employer is located, copies of the petition shall be mailed to those remote locations no later than the next working day following receipt of the petition. The copies so mailed shall be displayed at those remote locations on the same day they are received.

10. Exceptions, Objections, and Petitions to Intervene shall be filed with the Public Employee Labor Relations Board electronically at pelrb@nh.gov or (if unable to file electronically) by mail or other delivery to 2 ½ Beacon Street, Suite 200, Concord, New Hampshire, 03301 within 15 days of the date this petition is filed with the board.

11. Mutual Agreement:

The parties have agreed to this modification petition.

For the Public Employer:

Date

Signature

Print Name/Title

For the Bargaining Unit:

Date

Signature

Print Name/Title

12. Petitioner's Signature and Certificate of Service:

Date: _____

Petitioner Signature

Print or type name

Certificate of Service

I hereby certify that on _____(date) a copy of this petition was provided by electronic mail if available and by regular mail or hand delivery to:

(Name of Public Employer Representative)

And/or

(Name of Incumbent Bargaining Unit Representative)

Date: _____

Signature

Print or type name