NOTICE TO EMPLOYEES

FROM THE
STATE OF FLORIDA
PUBLIC EMPLOYEES RELATIONS COMMISSION

The attached recertification petition has been filed seeking an election to determine whether certain employees desire to be represented by an employee organization for the purpose of collective bargaining. If an election is held, a Notice of Election will be posted giving complete details for voting.

YOU HAVE THE RIGHT UNDER FLORIDA LAW:

- **To self-organization**
- **To form, join or assist employee organizations**
- **To bargain collectively through a chosen representative**
- **To act together for the purpose of collective bargaining or other mutual aid or protection**
- **To refrain from any or all such activities**

Also, be aware that the State of Florida is a right-to-work state. Membership or non-membership in a labor union is not required as a condition of employment, and union membership and payment of union dues and assessments are voluntary. Each person has the right to join and pay dues to a labor union or to refrain from joining and paying dues to a labor union. No employee may be discriminated against in any manner for joining and financially supporting a labor union or for refusing to join or financially support a labor union.

PUBLIC EMPLOYEES RELATIONS COMMISSION
4708 Capital Circle Northwest, Suite 300
Tallahassee, Florida 32303
850-488-8641

THIS IS AN OFFICIAL GOVERNMENT NOTICE AND MUST NOT BE DEFACED.

PERC Form 5A
(Rev. 01/2025)

RECERTIFICATION PETITION

Complete and Return to:
PUBLIC EMPLOYEES RELATIONS COMMISSION
4708 Capital Circle N.W., Suite 300
Tallahassee, Florida 32303
PHONE: (850) 488-8641 / FAX: (850) 488-9704
Electronic Filing (e-PERC): https://perc.myflorida.com/co/eperc.aspx

Do Not Write in This Box

CASE NUMBER
RE-
DATE FILED

INSTRUCTIONS: A bargaining agent may use this form to petition for recertification pursuant to ss. 447.305(6) and 447.307, Fla. Stat., which is required to occur within 30 days after the Commission notifies the bargaining agent that its membership data filed pursuant to s. 447.305(3) is complete. The bargaining agent must be registered with the Commission before submitting a recertification petition, pursuant to s. 447.305, Fla. Stat. If any changes to the classifications in the bargaining unit have occurred since the Commission last defined the unit, you may specify the changes in this petition in lieu of filing a separate unit clarification petition. If more space is required, attach additional sheets, numbering items accordingly. ***If the Petitioner seeks to represent a new bargaining unit or displace the bargaining agent for an existing unit, please refer to PERC Form 4a – Representation-Certification Petition.***

1. CERTIFICATION NUMBER OF BARGAINING UNIT: 1391

2. NAME OF PETITIONER: United Faculty of Florida

   Address: 115 North Calhoun Street, Suite 6

   Tallahassee (City) | Florida (State) | 32301 (Zip Code)

3. PETITIONER'S REPRESENTATIVE: Elizabeth Danker Kritzer

   Title: Chapter President Email Address: lindsay.smithsparkman@floridaea.org / dankerl@gmail.com

   Phone No. 850-224-8220 Fax No.

   Address: 115 North Calhoun Street, Suite 6

   Tallahassee (City) | Florida (State) | 32301 (Zip Code)

4. PERC REGISTRATION NUMBER: **OR-**1986-144 Expiration Date: 08/19/26

5. NAME OF EMPLOYER: UNIVERSITY OF CENTRAL FLORIDA

   Address: 4000 Central Florida Blvd

   Orlando (City) | State | 32816 (Zip Code)

6. EMPLOYER'S REPRESENTATIVE: Charlie Piper

   Title: Director CCAS/Office of the Provost/Division of Academic Affairs Email Address: cpiper@ucf.edu

   Phone No. 407-823-5420 Fax No.

   Address: 12201 Research Parkway, Suite 200

   Orlando (City) | Florida (State) | 32816 (Zip Code)

7. **Has the bargaining unit definition changed since the last recertification election?**
☐ YES. *If yes, complete all remaining questions.* ☑ NO. *If no, skip to question 11 below.*

8. List the classification(s) in the bargaining unit that have been **modified or retitled** without any substantial change in job duties since the Commission last defined the unit. (If lengthy, attach a separate sheet.)

9. List the classification(s) in the bargaining unit that should be removed because they have been **abolished** or there has been a **substantial change in job duties** since the unit was last defined. (If lengthy, attach a separate sheet.)

10. List the title(s) for any classifications which you seek to **add to the bargaining unit**. (If lengthy, attach a separate sheet.) Provide a copy of either the job description, if any, or a brief description of the duties for each classification.

11. **Approximate Number of Employees** in the unit claimed to be appropriate: 1636

7. Is this petition supported by **Showing of Interest** from at least 30% of the employees in the current bargaining unit, which are signed and dated not more than 12 months before the filing of the petition? ☑ YES ☐ NO.

12. **Total number of Showing of Interest** filed in support of this petition: 594
Please deliver to the Commission the <u>original</u> signed and dated showing of interest, along with a corresponding list of names, arranged in alphabetical order by last name.

13. When does the current **collective bargaining agreement** (CBA) expire? 8/31/2027 ☐ NA

By my signature below, I affirm that I have read the above petition and all attachments. The statements contained herein are true to the best of my knowledge and belief. A copy of this fully executed form has been served on the other parties identified in item 5. FALSE STATEMENTS CONTAINED IN THIS FORM MAY RESULT IN FINE AND IMPRISONMENT PURSUANT TO CHAPTER 837, FLORIDA STATUTES.

E D Kratzer — 9/15/26

Signature of Petitioning Union's Representative — Date Signed

The Commission utilizes e-service as the primary method of delivery for orders, correspondence, and notices. Parties are responsible for ensuring that their email address on file with the Commission is correct and current.