



IMPORTANT INSTRUCTIONS FOR TEACHERS SERVED WITH RIF (LAYOFF) NOTICES

Dear CTA Member:

Each certificated employee who is served with a RIF notice is entitled to a hearing upon request. You must mail or deliver **both** a Request for Hearing and a Notice of Defense to the district within the specified time limit or you may waive your right to a hearing.

1. **REQUEST FOR HEARING.** In order to have a hearing, you must request one. This request must be made in writing within the time specified in the Notice of Intended Dismissal, usually **seven (7) calendar days after you receive the Notice**. Failure to request a hearing within the appropriate time limit will waive your right to participate in the hearing and you may be laid off as a consequence.

To request a hearing, fill out the attached form entitled Request for Hearing and address it to the district official who signed the Notice of Intended Dismissal. Deliver the original to the addressee, either in person or by registered mail at the address provided in the Notice. If you deliver the form personally, get a receipt or keep a record of the date, time, place, and recipient. Keep a copy for your records and provide a copy to your chapter president.

2. **NOTICE OF DEFENSE.** After the district receives your Request for Hearing, it will provide you with documents including a Statement to Respondent and an Accusation. After you receive the Accusation, fill out the form entitled Notice of Defense which is attached to these instructions, unless your attorney has provided you with different instructions. Do not use the forms provided by the district for this purpose. You must deliver the Notice of Defense to the superintendent, or the district official named in the Statement to Respondent, within **five (5) calendar days after the Accusation is served**. The Accusation is served on the date the district hand-delivers the Accusation, or, in the case of service by mail, the date the Accusation is placed in the mail. You may deliver the Notice of Defense personally or by registered mail to the school district at the address given in the Statement to Respondent so long as the Notice is received by the District within the five day period. If you fail to deliver the Notice of Defense on time you may waive your right to participate in the hearing.

If you have any questions about filing a Request for Hearing and/or Notice of Defense, contact your CTA chapter president immediately.

RIF PROCESS FLOWCHART

SCHOOL BOARD PASSES RIF RESOLUTION
(on or before March 15)

SCHOOL DISTRICT NOTIFIES YOU THAT
YOU WILL BE LAID OFF (on or before
March 15)



WITHIN 7 CALENDAR DAYS OF
NOTIFICATION, YOU MUST SUBMIT
REQUEST FOR HEARING



DISTRICT SENDS ACCUSATION



WITHIN 5 CALENDAR DAYS, YOU MUST
SUBMIT NOTICE OF DEFENSE



SETTLEMENT OR HEARING OCCURS ON
OR BEFORE MAY 7



ALL RECOMMENDATION GOES TO
SCHOOL BOARD—BY MAY 7



YOU ARE NOTIFIED OF FINAL DECISION
BY SCHOOL BOARD—BY MAY 15

WE ENCOURAGE YOU TO USE THE CTA FORMS FOR THE REQUEST FOR A HEARING AND NOTICE OF DEFENSE. WHEN YOU TURN IN THE FORMS, GET A TIME AND DATE STAMPED COPY FROM THE DISTRICT OFFICE AND SUBMIT ONE TO US.

ANY QUESTIONS? CALL US AT: 707-864-0305 or email at rmangino@cta.org

REQUEST FOR HEARING

Dear _____:

I hereby request a hearing to determine whether there is cause to not re-employ me for the 2011-2012 school year.

Signature

Printed Name

Address

_____, California _____

School Site

Date

NOTICE OF DEFENSE

TO: Governing Board

_____ School District

_____ (School Site)

Address: _____

_____, California _____

In response to your accusation, dated _____, 2011, I _____,

- 1. Request a hearing.
- 2. Object to the accusation upon the ground that it does not state acts or omissions upon which you may proceed.
- 3. Object to the form of the accusation on the ground that it is so indefinite or uncertain that I cannot identify the transaction or prepare my defense.

This constitutes my notice of defense pursuant to Government Code Section 11506.

Signature

Printed Name

Address

_____ California, _____

Date



INFORMATION REGARDING REPRESENTATION

GROUP REPRESENTATION

You are one of several certificated employees in your district (respondents) who were served with layoff notices who have requested a hearing and filed a Notice of Defense in the layoff proceeding. CTA has arranged to provide representation to all members in your situation.

The purpose of the representation provided is to ensure protection of the rights of all respondents to a full, fair and impartial hearing. Representation will include discovery and review of relevant documents, objection to the introduction of improper evidence, cross-examination of district witnesses, and presentation of evidence and motions on behalf of respondents as a group. (For example, in some cases it may be appropriate to move to dismiss the entire proceeding on various procedural grounds.)

POTENTIAL CONFLICTS OF INTEREST

However, each respondent must consider the possibility that he or she may also have particular individual defenses. You must understand that the representation provided by CTA cannot properly assert such an individual defense if it conflicts with the rights of another member of the group being represented in this proceeding.

It is improper for the group's attorney or representative to assert any contention on behalf of one person to the possible detriment of another person being represented. Therefore, respondents who wish to assert individual and possibly conflicting defenses must do so themselves or through a separate attorney or other representative.

Such conflicts of interest among respondents may arise in asserting seniority rights. For example, if you feel that your date of first paid service is earlier than that asserted by the district, you may argue that your retention (and rehire) rights are superior to those of another respondent. Similarly, it may be appropriate for you to present testimony and argue that because of your special qualifications, you have rights superior to those of another respondent employed on the same date as your date of hire.

You will be given an opportunity to assert any individual conflicting defenses or contentions at the hearing and you should exercise this right. You may also retain an attorney at your expense to represent you at the hearing.

Because of their ethical obligations, your CTA attorney or representative cannot properly assert any such defenses or contentions on your behalf. Accordingly, respondents represented by CTA in the layoff proceeding should immediately inform the attorney or staff representative of the existence of any such individual defenses or contentions they may have, so that they may be properly presented at the hearing.

CONSENT TO LEGAL REPRESENTATION

I, _____, declare that I am a permanent or probationary certificated employee of the _____ DISTRICT and a member of _____ (CTA/NEA). I have received from the district a notice of recommendation of non-reemployment, and have requested a hearing pursuant to Education Code Section 44949. The reasons given for the recommendation for non-reemployment are those set forth in Education Code Section 44955. I understand that similar notices were delivered to other certificated employees of the district and that other employees have also requested a hearing.

I understand that CTA has agreed to provide representation to its members to the extent possible to the entire group or class of certificated employees similarly affected by the district's action.

I hereby consent to and authorize representation at said hearing by _____, an attorney who participates in the CTA Group Legal Services Program. By executing this document, I understand and consent to such representation as a member of _____ and CTA and as a member of the group or class of employees similarly affected by the district's action.

In that regard, I agree to abide by, authorize and ratify all decisions made on behalf of the group or class represented. Such decisions may include, but not be limited to, decisions relating to strategy, the presentation of evidence, continuances of hearing dates, and extensions of notice deadlines.

I acknowledge that I have been advised and understand that relevant issues involved in the hearing include assignments, qualifications, seniority, and so-called "bumping rights", classification status issues so that real and potential competing and conflicting rights and interests may exist within the group or class represented. I further acknowledge that I have been advised and understand that I am free to secure independent counsel and representation at my own expense in lieu of that provided by CTA and, further, that I may do so at any time. I agree that if I do secure independent counsel I will notify my CTA counsel of that fact and recognize that upon that notification my CTA counsel will cease to represent me in the proceedings.

I agree to cooperate fully in the defense of this matter and acknowledge my individual responsibility promptly to request a hearing, to thoroughly read and review all notices served, and to provide all relevant information, including that relating to seniority and qualifications.

I understand that the representation provided herein relates only to the administrative hearing and that it does not include appeal or judicial review.

DATED: _____, 2011

Signature

Printed Name

Address

_____, CA _____

Personal E-mail address

Phone

Name of School Site

School Phone

CTA Membership ID#

**CONSENT TO REPRESENTATION BY
CTA REPRESENTATIVE**

I, _____, declare that I am a permanent or probationary certificated employee of the _____ DISTRICT and a member of _____ (CTA/NEA), that I have received from the district a notice of recommendation of non-reemployment, and that I have requested a hearing pursuant to Education Code Section 44949. The reasons given for the recommendation for non-reemployment are those set forth in Education Code Section 44955. I understand that similar notices were delivered to other certificated employees of the district and that other employees have also requested a hearing.

I understand that CTA has agreed to provide representation to the entire group or class of certificated employees similarly affected by the district's action.

I hereby consent to and authorize representation at said hearing by _____, a CTA representative. By executing this document, I consent to such representation as a member of _____ and CTA and as a member of the group or class similarly affected by the district's action.

In that regard, the undersigned consents to abide by, authorize and ratify all decisions made on behalf of the group or class represented. Such decisions may include, but not be limited to, decisions relating to strategy, the presentation of evidence, continuances of hearing dates, and extensions of notice deadlines.

I acknowledge that I have been advised and understand that relevant issues involved in the hearing may include assignments, qualifications, seniority, and so-called "bumping rights", classification status issues so that real and potential competing and conflicting rights and interests may exist within the group or class represented. I further acknowledge that I have been advised and understand that I may secure independent counsel and representation at my own expense in lieu of that provided by CTA and, further, that I may do so at any time upon notice. I further understand that _____ is not an attorney and the representation provided herein will not be by legal counsel. I have been advised and encouraged to consult with independent legal counsel whenever I wish to do so.

I agree to cooperate fully in the defense of this matter and acknowledge my individual responsibility to promptly request a hearing, to thoroughly read and review all notices served, and to provide all relevant information, including that relating to my seniority and qualifications.

I understand that the representation provided herein relates only to the administrative hearing and that it does not include appeal or judicial review.

DATED: _____, 2011

Signature

Printed Name

Address

_____, CA _____

Personal E-mail address

Phone

Name of School Site

School Phone

CTA Membership ID #



2011 RIF DATA FORM

Personal Information

Last name: _____ First name: _____

Phone: (____) _____ Non-work e-mail: _____

Mailing address: _____

Employment Status and History

Current employment status (check one):

- Prob 1 Prob 2 Permanent Temporary Don't know/unsure

Current position: _____

(Example: Teacher, Nurse, Counselor, etc.)

Do you work full time? Yes No If no, what percentage of an FTE do you teach? _____%

If applicable, list current grade level(s) and subject(s): _____

List any other grade levels and subjects you have taught at **this** District, in reverse chronological order, with approximate dates. If you worked less than full-time, please also list hours per week or percent FTE:

Year(s)	Assignment	Hours per week or FTE %
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Seniority Date

Seniority date according to the district: _____ Seniority number: _____

Do you believe your first date of paid probationary service with this District is different from the seniority date listed above? If so:

What do you believe is your first date of paid probationary service? _____

Briefly describe the prior service that you performed for the District: _____

If you are contesting your seniority date, please attach copies of all your contracts with the District, and also **bring copies with you to the hearing.**

(see other side)

Did you work at the District at least 75% of the school year during the year **immediately before** the year of your seniority date according to the District?

- Yes
- No

If yes, how were you classified by the District?

- Temporary
- Long term sub
- Day to day sub
- Other: _____

If yes, what were your dates of prior service? _____

Credentials, Certifications and Degrees

Please list all of your current credentials, authorizations, and certifications, including CLAD and BCLAD:

Undergraduate major and minor:

Major: _____ Minor: _____

Any post-bachelor's degrees: _____

Subject matter and number of any other post-bachelor's units: _____

Other

Are you aware of any employee in the District with **less seniority** than yourself, who is being retained to perform a service that **you are credentialed and qualified** to perform? If so, please list the name(s) of any such person or persons, and seniority date, if known:

Please state any other information you believe may be important to your case:
