

Kansas Department of Labor
OFFICE OF LABOR RELATIONS – PROFESSIONAL NEGOTIATIONS
401 SW Topeka Boulevard, Topeka, KS 66603-3182
(785) 368-6224

Petition for Impasse Declaration

FILING FOR: Joint Request

 Single Request

Do Not Write In This Space

CASE NO: _____

DATE FILED: _____

INSTRUCTIONS: File an **original and two copies** with the Office of Labor Relations, 401 SW Topeka Boulevard, Topeka, Kansas 66603-3182 by Certified Mail. Questions regarding this form may be directed to **(785) 368-6224**. If more space is required for any item, attach additional sheets, numbering items accordingly.

1. Name of Employer: _____
2. Name of Employer Representative for Negotiations: _____

3. Address of Representative: _____
4. Telephone Number: _____
5. Name of Recognized Employee Organization: _____

6. Name of Employee Organization Representative: _____

7. Address of Representative: _____

8. Telephone Number: _____
9. Date of **First** Negotiation Session: _____
10. Date of **Last** Negotiation Session: _____
11. Number of Negotiation Sessions: _____

13. Have the parties discussed the possibility of being at impasse? _____

When? _____

DECLARATION

I declare that I have read the above petition; that the statements contained herein are true and correct to the best of my knowledge and belief; that I am of the belief on each subject listed above the parties have become deadlocked after negotiating exhaustively to that point where the positions of the parties are set and beyond which neither is presently prepared to go; that the assistance of a neutral third party may be useful in finding a means to end the impasse; and that the parties have satisfied their statutory duty to bargain in good faith in reaching this impasse.

Signature of Employee Organization Representative

Title

Date

Signature of Employer Representative

Title

Date