

CHAPTER APPLICATION FOR CCA EMERGENCY RESPONSE
Emergency Response Task Force (ERTF)

Email the **completed** application to CCA President Lynette Nyaggah, president@cca4me, and ERTF Chair Phyllis Hall at drhomegirl@msn.com:

Chapter Name	
--------------	--

Mailing Address	
-----------------	--

Name of President		Phone	()
-------------------	--	-------	-----

Number in bargaining unit	
---------------------------	--

Number of CCA members in bargaining unit	
--	--

Annual chapter (local) dues per member		
	\$	

Regional CTA Staff Summary of emergency	
---	--

1. Name and/or cause of emergency:

2. Describe chapter efforts to date:

3. Have Unfair Labor Practices been filed? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, specify:

4. Specify plans and/or actions taken in conformance with PERB procedures:
--

Impasse:	
Mediation:	

Fact-Finding:	
---------------	--

Certification Filing(s): (include election date, if set)	
--	--

5. Specify chapter membership authorization of, and commitment to, contemplated concerted action or election plan: (If more space is needed, please attach additional material)

6. Describe concerted action or election plan: (Attach calendar and additional material if needed)

8. For what period of time is crisis budget projected?

9. Attach projected crisis budget and, if applicable, explanation of local contribution and/or financial hardship

Signatures	00/00/0000
Chapter President	Date
CTA staff consultant	Date
ERTF Chair	Date

FOR ERTF USE ONLY	00/00/0000	Chair Initials
Date received by ERTF		
Date of Motion		
Date of Vote		
Approve #		
Oppose #		
If funds, date distributed		