

# PAT CONTRACT EXCEPTION 2019-2020

DEADLINE: May 17, 2019

## Application

This application is to be completed by the PAT Head Representative and signed by the site administrator. Submit **COPY OF BALLOT, SIGNED APPLICATION FORM, and COPIES OF SCHEDULES/ CALENDARS** to the PAT Advocacy Committee via PONY or scan and e-mail: [jennifer.dixon@oregoned.org](mailto:jennifer.dixon@oregoned.org)

School/Site \_\_\_\_\_ Date \_\_\_\_\_

1. \_\_\_\_\_ Renewal of Previous Contract Exception  
\_\_\_\_\_ New Contract Exception

2. State the reason for requesting an exception to the contract.

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3. Identify the contract article(s) relevant to the request for exception.

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4. Explain how the proposed exception impacts unit members.

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5. Explain the options for unit members who oppose the exception.

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6. Voting information:

- a. Number of unit members at site: a. \_\_\_\_\_  
b. Number of unit members approving the exception: b. \_\_\_\_\_  
c. Number of unit members opposing the exception: c. \_\_\_\_\_  
d. Number of unit members not voting (count as "no" vote): d. \_\_\_\_\_  
**e. Percentage of unit members approving the exception: e. \_\_\_\_\_ %**

To arrive at the percentage (e), divide the number approving the exception (b) by the total number of unit members (a).

Head PAT Representative: \_\_\_\_\_ Site Administrator: \_\_\_\_\_  
Print Name Print Name

\_\_\_\_\_  
Signature Date: \_\_\_\_\_ Signature Date: \_\_\_\_\_

Head PAT Rep Contact info: Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Action by PAT Advocacy Committee: Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_

Approved by PAT: \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Signature

Approved by PPS: \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Signature

**Portland Association of Teachers**  
**Contract Exception 2019-2020**

**Unit Member Ballot**

**Explanation**

To protect unit members' rights guaranteed by the PPS/PAT Agreement and to preserve the integrity of the bargaining process, schools/sites must apply for a Contract Exception when they wish to implement a practice or program that deviates from current contract language. A granted exception is in force for one school year. A request for renewal must be made and approved annually.

School/Site: \_\_\_\_\_ Date(s) of Voting \_\_\_\_\_

1. State the reason for requesting an exception to the contract.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Identify the contract article(s) relevant to the request for exception.

\_\_\_\_\_

3. Explain how the proposed exception impacts unit members.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Explain the options for unit members who oppose the exception.

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\_\_\_\_\_

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\_\_\_\_\_ **I VOTE IN FAVOR OF THE CONTRACT EXCEPTION**

\_\_\_\_\_ **I VOTE AGAINST THE CONTRACT EXCEPTION**

Return ballot to PAT REP \_\_\_\_\_ by \_\_\_\_\_  
PRINT NAME OF PAT HEAD REPRESENTATIVE DATE