

Date

Name

Address

City, State, Zip Code

RE: Layoff Notice

Dear _____:

As you may know recent events in the [Oregon Legislature][District] have had a profound impact on funding for education in our district. The district has decided to eliminate some classes and adjust others. The Board of Directors met on [date] and authorized a program reduction and subsequent layoff of staff. This letter is to notify you, pursuant to Article ___ of the collective bargaining agreement, you will be laid off effective [date].

To assure that you understand the procedures agreed to by the district and the association we are enclosing a copy of Article ___ of the negotiated agreement. Please read the entire article carefully and review your rights under the contract with an association representative.

[Article ___, Section ___ refers to your bumping rights. If you wish to exercise your bumping rights, please notify [_____] at _____.]

Article ___, Section ___ relates to recall procedures. If you would like to be placed on the recall list, please complete the attached *Recall Request* form and return it to [_____].

[_____] School District provides outplacement services for displaced employees. Attached you will find a summary sheet with more information about the services available to you. For more information you can contact your association representative or [_____]. Also attached is an information sheet from the Oregon Employment Department with contact numbers you may find helpful.

If you have any questions please contact your local association representative or the personnel office.

Sincerely,

Superintendent

Recall Request

Name _____

Date Laid Off _____

Position _____

Address to which recall notification shall be sent

Telephone Number _____

NOTE: If your address changes, you must notify the district in writing if you would like to remain on the recall list