

CONSENT TO LEGAL REPRESENTATION

T.	, declare that I am a permanent certificated
employee of the San Diego	Unified School District and a member of the San Diego Education
1 7	EA. I have received from the district a notice of recommendation of
	we requested a hearing pursuant to Education Code Section 44949.
1 .	ecommendation for non-reemployment are those set forth in
Education Code Section 44	1 7

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 SDEA/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 Ms. Fern Steiner, 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 SDEA 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 present 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, thoroughly to 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:	, 2017	
Signature		
Printed Name		
Address		
Personal E-mail address		
Phone		
Name of School Site/Program		