

PROCEDURAL GRIEVANCE FORM

Date:

Note: It is agreed that neither the union nor the Company will use this Procedure Form as evidence in an arbitration procedure. This form does not limit either the company or the Union from bringing up additional contractual violations.

WHO is involved?

Grievant:		Job Classification:	
Dept #:	Dept	Section:	
Spv's Name:		Union Steward:	

WHEN & WHERE did this happen?

Date:	Time:	Location:
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WHAT are the facts of the Grievance? (Explain):

WHY is this a grievance? (What provisions of the Labor Agreement has been violated?):

HOW to remedy? (The Steward – Identify how to correct situation and remedy sought. Comments):

The Supervisor's response:

Signature of Steward:

Date:

Signature of Supervisor:

Date:

Supervisor's Title: