

# Utility Workers Union of America, AFL-CIO

## Local 1-2

8 East 36<sup>th</sup> Street New York, NY 10016

(212) 575-4400



### GRIEVANCE REPORT

Member's Name \_\_\_\_\_ Employee No. \_\_\_\_\_

Home Address \_\_\_\_\_ Phone No. \_\_\_\_\_

E-mail \_\_\_\_\_ Title \_\_\_\_\_

Dept/ Bureau \_\_\_\_\_ Company \_\_\_\_\_

Location \_\_\_\_\_ Supervisor \_\_\_\_\_

Nature of Grievance—PLEASE CHECK THE APPROPRIATE BOX BELOW

- Termination
- Suspension
- Denied Progression
- Denied Merit
- Other (Warnings) Give a brief explanation below.

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

Clause of Contract Violated (list articles violated)

\_\_\_\_\_

Remedy  To be made whole, including but not limited to any lost wages, benefits, merit increases and progressions.

Other (Give a brief explanation below)

\_\_\_\_\_

\_\_\_\_\_

Today's Date \_\_\_\_\_ Signature of Member \_\_\_\_\_

**Result of 1<sup>st</sup> Step in Grievance Procedure**

Date of Grievance Meeting \_\_\_\_\_

Name of Steward \_\_\_\_\_

Name of Company Representative \_\_\_\_\_

Names of Others Present \_\_\_\_\_

\_\_\_\_\_

Was information requested in writing by Steward?  Yes  No

Was information provided by Company Rep?  Yes  No

Did Company Rep provide written response?  Yes  No

Signature of Steward \_\_\_\_\_

**Result of 2<sup>nd</sup> Step in Grievance Procedure**

Date of Grievance Meeting \_\_\_\_\_

Name of Agent / Designee \_\_\_\_\_

Name of Company Representative \_\_\_\_\_

Names of Others Present \_\_\_\_\_

\_\_\_\_\_

Was information requested in writing by Agent / Designee?  Yes  No

Was information provided by Company Rep?  Yes  No

Did Company Rep provide written response?  Yes  No

Settlement: Yes \_\_\_\_\_ No \_\_\_\_\_

Signature of Business Agent / Designee \_\_\_\_\_

**Result of 3<sup>rd</sup> Step in Grievance Procedure**

Date of Grievance Meeting \_\_\_\_\_

Name of SBA / Designee \_\_\_\_\_

Name of Company Representative \_\_\_\_\_

Names of Others Present \_\_\_\_\_

\_\_\_\_\_

Was information requested in writing by SBA / Designee?  Yes  No

Was information provided by Company Rep?  Yes  No

Did Company Rep provide written response?  Yes  No

Settlement? Yes \_\_\_\_\_ No \_\_\_\_\_

Signature of Senior Business Agent / Designee \_\_\_\_\_

**\*\*\*\*\*Guidelines for Grievance Process\*\*\*\*\***

- This form stays in the possession of the Union at all times
- All information on this form is to be filled out by the union representative
- Make a copy of Grievance Report, Information Requests and all notes for your records

For example: Disciplinary Interview Report  
Statements from witnesses  
Statement from Grievant  
Steward's notes from interviews  
Employee Evaluations  
All other relevant documents

- Place originals in envelope and give to next Union Representative in preparation for next step of grievance process