

## EMPLOYEE GRIEVANCE FORM

Employee's Name \_\_\_\_\_ SS# \_\_\_\_\_

Area \_\_\_\_\_ Grade \_\_\_\_\_ Shift \_\_\_\_\_ Seniority \_\_\_\_\_

Dept. Head \_\_\_\_\_ Foreman \_\_\_\_\_ Leaderman \_\_\_\_\_

Nature of Grievance: \_\_\_\_\_

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

Clause of Contract Violated: \_\_\_\_\_

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

Settlement Desired: \_\_\_\_\_

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

Signature of Employee \_\_\_\_\_ Date \_\_\_\_\_

Signature of Shop Steward \_\_\_\_\_ Date \_\_\_\_\_

Foreman's Disposition (2nd Step): \_\_\_\_\_

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

Signature of Foreman \_\_\_\_\_ Date \_\_\_\_\_

3rd Step Disposition: \_\_\_\_\_

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

Signature of Union Official \_\_\_\_\_ Date \_\_\_\_\_

Signature of Shop Steward \_\_\_\_\_ Date \_\_\_\_\_

4th Step Disposition: \_\_\_\_\_

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

Signature of Director of Labor Relations \_\_\_\_\_ Date \_\_\_\_\_

Signature of Union Official \_\_\_\_\_ Date \_\_\_\_\_

Final Disposition: \_\_\_\_\_

Present at 3rd Step Hearing \_\_\_\_\_

Present at 4th Step Hearing \_\_\_\_\_