

CONFIDENTIAL

GRIEVANCE FACT SHEET

Please print:

Grievor's Name _____ Local No. _____
Address _____ Employer _____
_____ Department _____
Telephone No. _____ Supervisor _____
Classification/Rate _____ Fact Sheet Prepared by: _____
Date of Hire _____

WHEN did the grievance occur? Date: _____ Time: _____

WHERE did the grievance occur? (Exact location) : _____

WHAT are the facts of the grievance? _____

Who are the Witnesses to the grievance?

Names: _____ Phone No.: _____

Date(s) of any meetings with the company: _____

Has the problem occurred in the past? (yes or no): _____ When? _____

How has the company and union settled the problem in the past? _____

Are there any documents in the hands of the committee? Warnings, etc.? _____

Comments: _____

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