

I.U.O.E. LOCAL 772 GRIEVANCE FORM

EMPLOYER: _____ DEPARTMENT: _____

GRIEVANCE: _____

- INDIVIDUAL
- GROUP
- POLICY
- DISCIPLINARY
- NON-DISCIPLINARY

SETTLEMENT REQUESTED: _____

- FULL REDRESS
- CEASE & DESIST

DATE: _____ GRIEVOR'S SIGNATURE(S): _____

STEWARD'S / BUSINESS REPRESENTATIVE SIGNATURE: _____

EMPLOYER'S RESPONSE AT STEP #1: _____

DATE: _____ EMPLOYER'S SIGNATURE: _____

THE UNION DOES DOES NOT WISH TO PROCEED TO STEP #2.

DATE: _____ STEWARD'S SIGNATURE: _____

EMPLOYER'S RESPONSE AT STEP #2: _____

DATE: _____ EMPLOYER'S SIGNATURE: _____

THE UNION DOES DOES NOT WISH TO PROCEED TO STEP #3.

DATE: _____ STEWARD'S SIGNATURE: _____

