United Public Service Employees Union UNION RECORD OF GRIEVANCE FACT

This form is to be used by UPSEU Unit Officers and Stewards to aid in investigating a grievance. The FACT SHEET outlines the information that will be necessary to develop a strong case. Use additional pages to document all details.

Grievant:	Department:
Classification:	Date of Hire:
Date of Classificatio	n:Work Location:
	Describe incident(s) which gave rise to the grievance.
Who was involved?	Give names and titles (include witnesses)
When did it occur?	Give day, time date(s)
	Specific locations
Why is this a grieva	nce? What is being violated: contract, rules and regulations, unfair treatment, existing policy, past practice, local, state, federal laws, etc.
What is the remedy	sought? What must be done to correct the problem?
Additional commen	s: (Use reverse side if needed)
Grievant's Signatur	e:Date:
Steward:	Date:
Grievant's Home Ac	ldress:

NOTE: A COPY OF THIS FORM TO BE COMPLETED BY STEWARD OR UNIT OFFICER FILING GRIEVANCE SEND THE UNION GRIEVANCE FILE ALONG WITH A COPY OF THE GRIEVANCE (AND MANAGEMENT'S RESPONSE)