

Timelines & Information for Grievance

Grievance #: _____ Date Filed: _____

Grievant: _____ Phone Number(s): _____

Articles Violated: _____

Brief Description: _____ Steward: _____

Discussion with Supervisor: _____
Date

STEP 1	Filing after Discussion: _____ <small>(initiated with 15 working days of incident or knowledge of incident)</small>	Meeting Attendance: _____ _____ _____ _____
	Meeting Date: _____	
	Response from Supervisor: _____ <small>(5 working days to answer in writing)</small> Date	
	<input type="checkbox"/> Step not Necessary <input type="checkbox"/> Extension Granted Until: _____	

STEP 2	Filing after Step 1 Response: _____ <small>(5 working days)</small> Date	Meeting Attendance: _____ _____ _____ _____
	Meeting Date: _____ <small>(within 10 days of filing Step 2)</small>	
	Response from Supervisor: _____ <small>(5 working days after meeting)</small> Date	
	<input type="checkbox"/> Auto Advance <input type="checkbox"/> Extension Granted Until: _____	

STEP 3	Filing after Step 2 Response: _____ <small>(within 15 working days after response)</small>	Meeting Attendance: _____ _____ _____ _____ _____
	<input type="checkbox"/> Mediation: <input type="checkbox"/> Yes Response: _____ <input type="checkbox"/> No-->go to _____ <small>(10 days to respond)</small> (Date)	
	Meeting Date: _____ <small>(30 days after approval)</small>	
	Mediation Decision: _____	

	<input type="checkbox"/> Step 3 Meeting Date: _____ <small>(within 30 days from response from Step 2)</small>	
Response from Supervisor: _____ <small>(10 working days after meeting)</small> Date	<input type="checkbox"/> Auto Advance <input type="checkbox"/> Extension Granted Until: _____	

STEP 4 Arbitration	Situation Presented to Executive Board _____ Date	Take to Arbitration <input type="checkbox"/> Yes <input type="checkbox"/> No
	Notified Contract Administrator in Writing: _____ <small>(within 30 days from response from Step 3)</small>	All items Faxed <input type="checkbox"/> Yes <input type="checkbox"/> No
	Materials must be faxed/e-mailed to the Uniserve Director. Date of Fax/e-mail: _____	Confirmation Received <input type="checkbox"/> Yes <input type="checkbox"/> No
	Is there a confirmation from the Uniserve's Office? _____ Date	

Arbitration Date: _____ Ruling: _____