UNIT 7 GRIEVANCE

TO:

FROM:

BARGAINING UNIT NAME:

STATEMENT OF GRIEVANCE:

The ____________________________ is in violation of Article(s) ____________________________
_________________________ and other relevant provisions of the Agreement by: ____________________________

_________________________

_________________________

_________________________

_________________________

PROPOSED SOLUTION: __________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

Signature ____________________________

Date: ____________________________

cc: Grievant(s):
   MNA Chairperson(s):
   MNA Staff:
   Labor Specialist:

Delivered: in person □  mail □  by fax □

Signature of administrator or designee _____________________________________________

Date ____________________________  Time ____________________________