

GRIEVANCE FORM

OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION, AFL-CIO

3460 Hollenberg Drive, Suite A
Bridgeton, MO 63044-2455
Phone/Fax: 314-298-3910
e-mail: opeiulocal13@sbcglobal.net

Name of Unit: _____ Date Completed: _____

Grievant Name: _____ Grievant Signature: _____

Violation of Article _____, Section _____ Disciplinary Action: _____

Describe Grievance: _____

Dated Presented to Supervisor: _____ Supervisor: _____

Steward Report: _____

Steward Name: _____ Steward Signature: _____

Grievance Disposition: _____

Agreed to for Employer: _____ Date: _____

Agreed to for Union: _____ Date: _____

IF GREIVANCE IS NOT RESOLVED, FORWARD TO UNION OFFICE IMMEDIATELY.