

## Notice of Grievance

<b>Grievance Number</b> <small>(to be filled out prior to submission at Step 2)</small>	
<b>Date</b> (dd/mm/yyyy)	
<b>Unit</b>	60

<b>Type of Grievance (select one)</b>	<b>Individual Grievance</b>	
	<b>Group Grievance</b>	
	<b>Policy Grievance</b>	

Name of Grievor		Employee ID No.	
Job Title		Work Location	
Manager's Name		Shop Steward	

Article(s) allegedly violated (Article Number(s))	
Article Name(s)	
<b>Date of the occurrence of the alleged violation</b> (dd/mm/yyyy)	
<b>Nature of Grievance (description)</b>	
<b>Remedy Sought</b>	

<b>Step 1</b>			
Date Grievance submitted to Step 1 (dd/mm/yyyy)		Date of hearing (dd/mm/yyyy)	
Management Statement of Position:			
Date decision rendered (dd/mm/yyyy)		Manager's name & work phone	

<b>Step 2</b>			
Date Grievance submitted to Human Resources at Step 2 (dd/mm/yyyy)		Date of hearing (dd/mm/yyyy)	
Date decision rendered (dd/mm/yyyy)		Manager's name & work phone	

**Note: Only include this page if filing a group grievance**

**Additional Grievors**

Name of Grievor		Employee ID No.	
Job Title		Work Location	
Manager's Name			

Name of Grievor		Employee ID No.	
Job Title		Work Location	
Manager's Name			

Name of Grievor		Employee ID No.	
Job Title		Work Location	
Manager's Name			

Name of Grievor		Employee ID No.	
Job Title		Work Location	
Manager's Name			

Name of Grievor		Employee ID No.	
Job Title		Work Location	
Manager's Name			