

Date

Project \_\_\_\_\_

Union Name \_\_\_\_\_ Local \_\_\_\_\_

Collective Agreement  GPMA  NMA

Article/Clause Contravened: \_\_\_\_\_

JOB STEWARD	EMPLOYER	SUPERVISOR	EMPLOYEE/GRIEVOR NAME
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Full Name	Full Name	Full Name	Full Name
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Contact Info	Site/Area	Contact Info	Contact Info
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Statement/Nature of Grievance:

*Provide a brief description of incident. Attach a detailed statement to this form.*

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Remedy Requested:

*Indicate solution/resolution.*

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Please check as appropriate:

**Which of the following steps have been completed?**

- Between Employee and/or Job Steward - Company Supervisor
- Between Employee and Job Steward and/or Business Agent - Supervisor and Project Labour Relations Coordinator and/or Project Manager/Superintendent
- Between International Representative & Business Agent - Labour Relations Manager

Signed: **Job Steward** \_\_\_\_\_

Print	Sign	Date
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**Employer** \_\_\_\_\_

Print	Sign	Date
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**Employee** \_\_\_\_\_

Print	Sign	Date
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