

GRIEVANCE FACTS COLLECTION SHEET

(For IBEW use only)

Grievant:

Name

Job Classification

Location

Shop Steward:

Name

Title

Who is involved? Grievant, management, personnel, witnesses.

What happened? Facts, differing viewpoints & positions, background information.

Where did the problem(s) occur? Location, more than one location.

When did the problem(s) occur? Time of occurrence, more than one specific time.

Why is this a grievance? Violation of contract, law, past practice, safety, etc.

What is the resolution demanded? Specific, general, monetary remedy.