



UAW LOCAL 6000 GRIEVANT INFORMATION SHEET

TO BE FILLED IN BY GRIEVANT

Grievance Number: _____

Name of Grievant: _____ Employee I.D. Number: _____

Grievant's Home E-mail Address: _____ @ _____

Grievant's Work E-mail Address: _____ @ _____

Grievant's Address: _____
(give complete address using street numbers, city, state and zip code)

Phone Number(s): W: () _____ / H: () _____ / C: () _____

Rate of Pay: _____ Job Classification: _____ Seniority Date: _____

Steward's Name: _____

Supervisor's Name: _____ Supervisor's Phone Number: () _____

Supervisor's E-mail Address: _____ @ _____

Work Location: _____

Department: _____ Work Address: _____

Date of event(s) causing grievance: _____ Date Grievance filed: _____

Describe grievance **fully** (attach additional description or drawings as needed):

What solution are you seeking?

List the names of all persons (employees and supervisors) who have any information concerning your grievance, including signed written statements and state what information the persons have.

Have the facts involved in this grievance occurred previously? If so, state when and where and whether a grievance was filed citing the person(s) who filed the grievance.

If this grievance involves discipline, list previous disciplinary suspensions or warnings **given to you** by the Employer and the date of the discipline you received.

If you claim that other employees have received lesser or no discipline for the same or similar offense, then list the names of each such employee, describe the similar offense, including the penalty received, and the approximate date of the offense.

List any additional information:

Signature of Grievant

Date