REPORT OF LOCAL 21, IBEW GRIEVANCE
Avaya

UNIT #_________ DATE _____/____/_______ GRIEVANCE #________________________

UNION STEWARD GRIEVANT: COMPANY REPRESENTATIVE
Name_______________ Name______________ Signature__________________
Dept._______________ Title_______________ Date _____/____/_______
Location: _______________ Home Phone ______________
Work Phone ______________

Grievance originated by: _____Individual* _____Group _____Union Rep.
*(If individual what is Grievant's hire date ___/___/___)

General Classification of Grievance-
_____Absence Pay  _____Distress Pay  _____Promotion  _____Vacation
_____Contract Work  _____Holiday Pay  _____Shift Prof.  _____Work Conditions
_____Demotion  _____Mgmt vs. Craft Work  _____Suspensions  _____Work Jurisdiction
_____Discrimination  _____Overtime  _____Temp. Supvr.  _____Work Schedule
_____Dismissal  _____Premium Pay  _____Transfers & Details  _____Other

Agreement /Contract Violations if applicable Article _________ Sec.________

IMPORTANT: ALL INFORMATION REQUESTED ABOVE MUST BE COMPLETED BEFORE
PROCEEDING TO NEXT SECTION.

State what action caused this grievance. Also attach any supporting documents, letters, notes,
that are relative to this case.

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________________________________________________________________
GRIEVANCE #_____________

What action did the Company take. (Include copies of any supporting documents)

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<th>Date</th>
<th>Brief Summary</th>
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State Union’s Position

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Company’s Position

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Union demand for settlement:

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

If demand includes back pay, indicate name(s) of member(s) and work location, If a group or list include a copy of current seniority list

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<tr>
<th>Name</th>
<th>Work Location</th>
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IF GRIEVANCE INVOLVES DISCIPLINARY ACTION, COMPLETE PAGE 3.
IF GRIEVANCE DOES NOT INVOLVE DISCIPLINARY ACTION, GO TO PAGE 4.

DISCIPLINARY ACTION: COMPLETE APPROPRIATE SECTIONS

Type of disciplinary action taken:

____ Suspension: length of suspension_______________________
____ Demotion: From title __________ to title ______________ Date_____
____ Wage Progression Deferment: Length of Deferment________________
____ Dismissal: Effective Date (last date on payroll) ___________________
____ Other ______________________________________________________

Union notification:

____ Written ____ Verbal

Date /___/___ To____________________ By_________________

List progressive disciplinary action taken in sequential order.

Date Attachment* Brief Explanation

______ ______________ ________________________________
______ ______________ ________________________________
______ ______________ ________________________________
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*Letters, Memos, etc; also, indicate grievance number for any disciplinary action which may have been grieved.
### List dates of meetings, names titles and notes of management people

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<th>Date</th>
<th>Name &amp; Title</th>
<th>Notes</th>
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**Grievant's signature**

**Steward's signature**

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**District level review: Date :**

**Union representatives**

**Company representatives**

**State any change in Union or Company positions:**

**Disposition:**

**To Business Representative**

\[\text{(Name)} \quad \text{(Date)}\]