



SERVICE EMPLOYEES INTERNATIONAL UNION, LOCAL 668

# GRIEVANCE

(check one)

**Discipline**

**General**

**Classification**

TODAY'S DATE: \_\_\_\_\_

TO: \_\_\_\_\_

FROM (Your Name or Steward's Name): \_\_\_\_\_

NAME OF GRIEVANT(S) \_\_\_\_\_

SHOP: \_\_\_\_\_

DATE OF INCIDENT YOU ARE GRIEVING: \_\_\_\_\_

We grieve a violation of Article(s) \_\_\_\_\_ and any other appropriate Article of the Local 668 contract.

BRIEF STATEMENT OF THE GRIEVANCE (Describe contract violation): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REMEDY REQUESTED: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We request a hearing on the matter. We demand the employer remedy the contract violation by making the grievant whole and any other appropriate remedy.

Note: For additional information, please contact me at: \_\_\_\_\_

**Phone Number**

*(Give this copy to management, make a copy for your files, a copy for your business agent and a copy for the grievant.)*