



# SEIU Local 668 AGP Grievance Form

**GRIEVANCE** (check one)       Discipline  
     General

TODAY’S DATE: \_\_\_\_\_

TO: \_\_\_\_\_ (First Step Management)

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

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

CONTACT INFO: \_\_\_\_\_

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

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

We grieve a violation of Article(s) \_\_\_\_\_ and any other appropriate Article of the SEIU 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 and email address)

*This copy to Management, make a copy for your files, a copy for BA, a copy for grievant.*