

SPRINGFIELD FEDERATION OF PARAPROFESSIONALS, LOCAL 4098, AFT, AFL-CIO

Grievance Fact Sheet

This form is to be used by the Building Representative to aid in investigating a grievance. The FACT SHEET outlines the information that will be necessary to develop a strong case. Use additional pages to document all the details.

DO NOT TURN THIS FORM INTO MANAGEMENT. THIS INFORMATION IS FOR THE UNION'S USE ONLY.

GRIEVANT _____

SCHOOL LOCATION _____

JOB TITLE _____ DATE OF HIRE _____

What Happened? Also describe incidents which gave rise to the grievance.

Who was involved? Give names and titles (include witnesses) _____

When did it occur? Give day, time, date(s) _____

Where did it occur? Specific locations _____

Why is this a grievance? What is management violating: contract, rules and regulations, unfair treatment, existing policy, past practice, local, state, federal laws, etc.

What adjustment is required? What must management do to correct the problem?

Additional comments: Use reverse side if needed _____

GRIEVANT'S SIGNATURE _____ DATE _____

GRIEVANT'S HOME ADDRESS _____

GRIEVANT'S PHONE NUMBER _____

BUILDING REPRESENTATIVE'S SIGNATURE _____ DATE _____

BUILDING REPRESENTATIVE'S PHONE NUMBER _____

NOTE: A COPY OF THIS FORM TO BE COMPLETED BY THE BUILDING REPRESENTATIVE INITIATING THE GRIEVANCE PROCEDURE AND TO BE TURNED IN TO: Catherine Mastronardi, President, and Cheryl Downs, Grievance Committee Chairperson.