

CHICAGO NEWSPAPER GUILD, LOCAL 34071

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GRIEVANCE FORM

Employee: [Name of grievant] Date of Grievance: [date filing grievance]

Unit: [Name of bargaining unit] Job Title: [Grievant's title]

Dept: [What is the department] Steward: [Name of steward filing grievance]

Nature of Grievance:

On or about [insert date] [insert brief explanation of incident that happened-limit the statement to one or two sentences covering basic facts and use clear affirmative statements to assert union's position].

Contract Violations:

Including but not limited to Article [insert articles and sections of the contract that have been violated- if you aren't sure, include them anyway]; any and all applicable sections of the CBA, management policies, past practice and federal, state and municipal laws.

Remedy Requested:

The union demands that [Grievant's name] and all other affected employees be made whole in every way, including but not limited to [Insert remedy/what can be done to fix the problem, ex: cease and desist, provide back pay etc...] including any other appropriate relief.