



Local Union 1212

International Brotherhood of Electrical Workers

225 West 34 Street, Suite 1120
New York City, NY 10122

E-mail
ra@ibew1212.org
or
ro@ibew1212.org

Grievance Form and Record of Proceedings

Shop: _____ **Date:** _____ **(Leave Blank)**
Grievance No. _____

Grievant Name: _____ **Grievant Location:** _____ **Dept:** _____

Steward: _____

State Grievance: (Include Articles & Sections of the CBA and/or any rule or law that has been violated.)

Signed: _____
Aggrieved Employee Date

Signed: _____
Union Representative Date

(If space in any step is inadequate, attach separate sheets)

EMPLOYER RESPONSE:

Signed: _____
Employer Representative Date

Signed: _____
Union Representative Date

Date Employer Notified _____