

To:
Date:



Bellsouth
Telecommunications

REQUEST FOR FORMAL GRIEVANCE MEETING

- 1. Name of Grievant(s):
- 2. Date of Informal Meeting with Management:
- 3. Company Representative(s) in Attendance:
(Note Spokesperson with a checkmark✓)
- 4. Union Representative(s) in Attendance:
- 5. Grievant(s) in Attendance:
- 6. Issue Involved/Contract Section Involved:
- 7. Date Grievance Occurred:

TO BE COMPLETED BY JOB STEWARD

- 8. Meeting Requested: Date:
 Time:
 Place:
- 9. Union Representative who will attend:
- 10. Grievant(s) who will attend:
- 11. Reply to Request should be directed to:
Name: Address:
 (Street / City / State / Zip)
- 12. Additional Information Relevant to Grievance:
- 13. Reply to request should be directed to:
Name: Address:
 (Street / City / State / Zip)

TO BE COMPLETED BY LOCAL
PRESIDENT OR HIS/HER DESIGNEE

Signature

Note: This form must be filed with the Operations Manager within fourteen (14) days following the Informal meeting.