## INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS Grievance Form and Record of Proceedings

L.U	o Grievance No		
	Date:	Time:	a.m./p.m.
Name:	Employee ID:	Dept:	
State Grievance:			
Settlement Requested:			
Signed:(Aggrieved Employee)		Signed:(Union Representative)	
Company's Reply to Grievance:			
Is Decision Satisfactory?(		Signed:(Company Representati Has case been appealed?(Signed:(Union Representative)	Yes)(No)Date:
Union's Reply:			
Company's Reply to Grievance:			
Is Decision Satisfactory?(		(Union Representative)	Yes)(No) Date:
Union's Reply: :			
Company's Reply to Grievance:			
Is Decision Satisfactory?(	yes)(No)	Signed:(Company Representati Has case been appealed?(Company Representati	ve) Yes)(No)
Case Appealed by: UnionCompany:		Signed:	
Company:		Date:	