

NALC **BRANCH** **210**

Date of Infraction:_____ Date of Grievance:_____.

Grievants Name:
Grievants Address:
Grievants Phone Number:
Work Location:
Stewards Name:
Supervisors Name:

Informal Denial
Worksheet
To be Used For
Stewards Notes

COMPLETE AND
ATTACH TO THE
JOINT STEP A GRIEVANCE FORM

Issue Statement:

Undisputed Facts:

Disputed Facts (Union Full and Detailed Statement) (Use Separate Paper if Necessary):

Managements Response to the Grievance (Take Notes):

Remedy Requested: