

Keyword/Issue:

TCEU Local 416 Grievance Form



For Office Use Only

CUPE Rep.

Intake Officer

Date Received:

Step:

File #:

Database Update:

Grievor:	Employee #
Address:	Phone #
	Email
Unit:	Steward:
Supervisor:	Work Location:
Unit Chair:	Classification:
Grievance Submitted by:	Phone #

Grievance: The employer has violated the Collective Agreement including but not limited to Article(s) _____ and /or related legislation by _____

Redress: Full redress, including but not limited to:

1. That the violation be declared;
2. That the employer immediately cease and desist from the activity(ies) listed above;
3. _____
4. Anything other redress deemed appropriate by a Board of Arbitration or a Sole Arbitrator and / or to make me whole.

Signature of Grievor

Authorized Local 416 Signature

Dated at Toronto, this _____ day of _____, 20____.

By signing above, the grievor agrees to keep Local 416 informed of any change of address and their workplace and telephone number in a timely manner and understands that failure to do so may result in a delay or interfere with processing the grievance through the steps of the Grievance Process and / or Arbitration.

T.C.E.U. Local 416 – Grievance Fact Sheet

Grievor's Name:	Seniority Date:
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Employment Status

Permanent <input type="checkbox"/>	Temporary <input type="checkbox"/>	Probationary <input type="checkbox"/>	Other <input type="checkbox"/>
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Disciplinary Record:

Do you have any active grievances or Minutes of Settlement that may relate to this grievance?

Grievance:	If so, explain:

MOS:	If so, explain:

What, where, when, who, why? Please give details relevant to this grievance being filed.

If you need more room for additional information, please use back side.

Grievor's desired remedy to grievance

Local 416 Grievance Fact Sheet

Additional Information:

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File No. _____

Large empty rectangular box for providing additional information.

Grievance Checklist

cope343

Include this information on the Grievance Fact Sheet
and submit copies of all relevant documents to the Local Union Office.

Alternate Rate / Superior Duties

- Grievor's classification, seniority, rate of pay, and regular work assignment;
- Name, classification, seniority, and regular work assignment of the workers(s) who were given the alternate rate or superior duties;
- Days and times in question and grievor's assignment on day(s) in question;
- Rate of pay applicable to assignment;
- Grievor's experience and previous jobs; and
- Management's reason for not paying the higher rate.

Discipline

- Grievor's disciplinary record including discipline that may have expired;
- Complete record of events leading to discipline;
- Copy of discipline issued;
- Copy of any policies the employer claims were breached; and
- Copy of investigation notes and witness statement(s) with witness' contact information.

Harassment / Discrimination

- Incident details including date, time, location, and witnesses including witness statement(s) and witness' contact information;
- Copy of investigation notes
- Effects on grievor including work-related, personal, health, use of sick time, etc ; and
- History of related or similar behaviour.

Job Posting

- Grievor's classification, seniority, work history and disciplinary record;
- Copy of job posting, grievor's application, and employer's response to application and / or interview / assessment;
- Name, classification and seniority of successful applicant; and
- In the case of a denied interview / assessment, the name(s), classification and seniority of everyone who was interviewed / assessed.

Overtime

- Grievor's classification, seniority, rate of pay, location, section, and regular work assignment;
- Name, classification, seniority, location, section, and regular work assignment of the worker(s) who were given the overtime;
- Days and times in question and grievor's assignment on day(s) in question;
- In the case of holiday-related overtime, include documents (e.g. - work schedule) to demonstrate that the grievor was entitled to the overtime / holiday pay;
- Description of the practice of assigning and paying overtime in the relevant location and / or section; and
- Copies of relevant pay stubs.