



**AFSCME Council 5, AFL-CIO**  
LOCAL  
The American Federation of  
State, County, and Municipal Employees, AFL-CIO

# OFFICIAL GRIEVANCE FORM ▪ STEP \_\_\_\_\_

Name of Employee (Grievant) \_\_\_\_\_ Classification \_\_\_\_\_

Department and Work Location \_\_\_\_\_

Immediate Supervisor and Title \_\_\_\_\_

**Statement of Grievance (Write the nature and the facts of the grievance: who, what, where, when why)**

\_\_\_\_\_

**Contract Violations (List all Contract Articles and how they were violated)**

\_\_\_\_\_ And all other applicable articles.

**Remedy Sought (What employer action will resolve this grievance)**

\_\_\_\_\_ Make the grievant whole.

**Disposition of the Grievance (What happened)**

\_\_\_\_\_

.....  
Signature of the Union representative \_\_\_\_\_ Date \_\_\_\_\_

Signature of Employee \_\_\_\_\_ Date \_\_\_\_\_

Signature of the Mgmt representative \_\_\_\_\_ Date \_\_\_\_\_

This form is to be signed by the employee and/or the AFSCME representative handling the case. The grievant, by signing this form acknowledges that the grievance is the property and responsibility of the union. The union will make all final decisions with respect to settlement or arbitration as the grievance's exclusive representative. The grievant also acknowledges that the resolution of this grievance either by settlement or arbitration may prevent causes of action outside the grievance procedure.