No.

GRIEVANCE FORM

FILED BY: EMPLOYEE UNION COMPANY

LODGE No. 2424 OF DISTRICT 1

INTERNATIONAL ASSOCIATION OF MACHINISTS

AND AEROSPACE WORKERS — AFL-CIO

COMPANY: _		SHOP:	
NAME OF EMPLOYEE: DEPT. FOREMAN:		EMPLOYEE No. SHOP STEWARD	DEPT. No.
DATE OF HIRE:	CLASSIFICATION:		PAY GRADE

GRIEVANCE:

DATE:

DESIRED SETTLEMENT: .

	SIGNED	GRIEVANT
	GRIEVANCE COMMITTEE	
	SHOP STEWARD	
ANSWER:		
STEP 1		
STEP 2		
STEP 3		
STEP 4		