

**SEIU (SERVICE EMPLOYEE INTERNATIONAL UNION)
GRIEVANCE PROCEDURE FORM**

Before filling out this formal, written grievance, carefully read Article 9, Grievance Procedure of the current Labor Agreement. Respondents please attach statements to this form if additional space is required. Time limits will be strictly adhered to unless the Association and the City, pursuant to Article 9 mutually agree upon a delay. **Please type or print with a ballpoint pen.**

FORMAL GRIEVANCE PROCEDURE: Must be filed within **ten (10) business days** of the incident. Filing a grievance waives the employee's ability to pursue a City Civil Service Appeal if otherwise available.

GRIEVANCE: (Include date, article and section violated, substance of grievance and action requested): _____

SIGNATURE: _____ DATE FILED: _____
AGGRIEVED EMPLOYEE

STEP 1. SUPERVISOR'S ANSWER: (Time limit ten (10) business days):

SIGNATURE: _____ DATE FILED: _____
SUPERVISOR

I have submitted a written grievance and verbally discussed this grievance with my immediate supervisor. I (am) (am not) satisfied with the answer. I (wish) (do not wish) to proceed to Step 2 of the grievance process.

SIGNATURE: _____ DATE FILED: _____
AGGRIEVED EMPLOYEE

STEP 2. DEPARTMENT DIRECTOR'S ANSWER (Time limit ten (10) business days):

SIGNATURE: _____ Date Rec'd. _____ Date Ans. _____
DEPARTMENT DIRECTOR

I (am) (am not) satisfied with the answer given by the Department Director and (wish) (do not wish) to have my grievance heard by the Director of Human Resources.

SIGNATURE: _____ Date Rec'd. _____ Date Ans. _____
AGGRIEVED EMPLOYEE

Submit to Human Resources Director ten (10) business days from date of Department Director's response, if not settled.

STEP 3. HUMAN RESOURCES DIRECTOR'S ANSWER (Time limit twenty (20) business days):

SIGNATURE: _____ Date Rec'd. _____ Date Ans. _____
DIRECTOR OF HUMAN RESOURCES

I (am) (am not) satisfied with the answer given by the Director of Human Resources and (wish) (do not wish) to have my grievance heard by the City Manager.

SIGNATURE: _____ Date Rec'd. _____ Date Ans. _____
AGGRIEVED EMPLOYEE

Submit to City Manager ten (10) business days from date of Director of Human Resources response, if not settled.

STEP 4. CITY MANAGER'S ANSWER AND DECISION (Time limit twenty (20) business days):

SIGNATURE: _____ Date Rec'd.: _____ Date Ans.: _____
CITY MANAGER

I (am) (am not) satisfied with the answer given by the City Manager and (wish) (do not wish) to have my grievance heard by an arbitrator.

SIGNATURE: _____ Date Rec'd. _____ Date Ans.: _____
AGGRIEVED EMPLOYEE

STEP 5. ASSOCIATION SUBMITTED TO ARBITRATION (Time limit fifteen (15) business days):

Association shall select one of the following:

- The Union agrees to submit the grievance to an arbitrator.
- The Union DOES NOT agree to submit the grievance to an arbitrator.
- The Union DOES NOT agree to submit the grievance to an arbitrator solely due to the grievant's lack of membership in the Association.

SIGNATURE: _____ Date _____
ASSOCIATION REPRESENTATIVE

ORIGINAL GRIEVANCE ALONG WITH ALL ATTACHMENTS MUST BE FORWARDED TO THE HUMAN RESOURCES DEPARTMENT FOR DISTRIBUTION.