

GRIEVANCE OUTLINE

1	DISCIPLINE (NATURE OF) OR CONTRACT (ISSUE)		CRAFT	DATE	UNION GRIEVANCE #	USPS GRIEVANCE #	
6	UNIT/SEC/BR/STA/OFC	DATE/TIME	USPS REP - SUPP		GRIEVANT AND/OR STEWARD		
7	STEP 1 DECISION BY (NAME & TITLE)			DATE & TIME	INITIALS	INITIALING ONLY VERIFIES DATE OF DECISION	
8	GRIEVANT PERSON OR UNION	ADDRESS	CITY	STATE	PHONE		
9	SOCIAL SEC. NO.	SERVICE SENIORITY CRAFT	FTR - PTR - PTF <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	LEVEL	STEP	DUTY HRS	OFF DAYS SA SU M T W T F
10	JOB#/PAY LOCATION (UNIT/SEC/BR/STA/OFC)	WORK LOCATION ZIP CODE			LIFETIME SECURITY YES <input type="checkbox"/> NO <input type="checkbox"/>	VETERAN YES <input type="checkbox"/> NO <input type="checkbox"/>	

A. *Problem:*

B. *Contract Reference:*

C. *Background:*

D. *Documents:*

E. *Corrective Action:*

F. *Management's Response:*