



#301 – 4501 Kingsway, Burnaby, BC V5H 0E5  
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# GRIEVOR'S STATEMENT

(PLEASE PRINT)  
**FOR THE UNION ONLY**

**To be completed and signed by the grievor and submitted to the job steward or union representative**

## GRIEVOR

Name: _____	Date: _____
Home Email: _____	Home Phone: _____
Home Address: _____	
Employer: _____	Department: _____
Job Title or Classification: _____	Rate: _____
Status: FT/PT/Casual _____	Seniority - Date of Hire: _____
Member ID: _____	Date of Incident: _____

## GRIEVOR'S STATEMENT

Please describe the incident, including what happened, how and where it happened, all members involved and what you would like as a resolution.

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**SUPERVISOR** or other manager involved

Name: \_\_\_\_\_  
Department: \_\_\_\_\_  
Job Title: \_\_\_\_\_

**WITNESS** or other persons involved

Name: \_\_\_\_\_  
Department: \_\_\_\_\_  
Job: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
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Name: \_\_\_\_\_  
Department: \_\_\_\_\_  
Job: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
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Name: \_\_\_\_\_  
Department: \_\_\_\_\_  
Job: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Please sign below and forward all of the relevant documentation to your job steward or union representative.**

\_\_\_\_\_  
**Grievor's Name**

\_\_\_\_\_  
**Grievor's Signature**

\_\_\_\_\_  
**Date**