

GRIEVANCE TRACKING FORM

The GRIEVANCE INFORMATION and STEP A INFORMATION portions of this form must be filled out when the union appeals it's grievance to STEP A. IT IS THE FORMAL STEP A REPRESENTATIVES RESPONSIBILITY TO SECURE A GATS CASE NUMBER for the grievance. In order to do that, FAX this form, with your portion completed, to DISTRICT LABOR at (513) 684- 5393 immediately upon the grievance's appeal to FORMAL A. Your case will entered into GATS & this form will be returned to you with the GATS number. This form must be included in your case file. IF YOUR CASE IS RESOLVED AT FORMAL STEP A, YOU MUST NOTIFY DISTRICT LABOR SO THE CASE CAN BE UPDATED IN GATS

GRIEVANCE INFORMATION	
INCIDENT DATE-	OFFICE FINANCE # -
GRIEVANT'S NAME <i>(printed Last, First, M I)</i>	EMPLOYEE # -
BRANCH GRIEVANCE # -	APPEAL RECEIVED DATE -
ARTICLE(S) CITED –	ISSUE(S)*

STEP A INFORMATION	
<u>INFORMAL UNION REP</u>	<u>INFORMAL MGMNT REP</u>
 <u>FORMAL UNION REP</u>	 <u>FORMAL MGMNT REP</u>
<i>(printed Last, First, M I)</i>	<i>(printed Last, First, M I)</i>
STATION / BRANCH NAME-	STATION or BRANCH NAME-
ADDRESS	ADDRESS
CITY	CITY
STATE	STATE
ZIP+4	ZIP+4
PHONE #	PHONE #
	FAX #

FOR DISTRICT LABOR OFFICE USE ONLY	
GATS CASE NUMBER:	DATE FORMAL A CONTACTED LABOR FOR GATS NUMBER:
 <i>(printed Last, First, M I)</i>	
GATS INPUT MADE BY:	DATE CASE ENTERED INTO GATS:
 <i>(printed Last, First, M I)</i>	

*** Issue Examples – LOW, & Day Suspension, 14 Day Suspension, Removal, Letter of Demand, Overtime, Leave, Safety, Light Duty, Holiday, etc...**