



**NLVPSA
Grievance Form**

Name: _____ **Rank:** _____ **Assignment:** _____

Grievance Topic: _____

Note: A grievance is defined as a complaint regarding working conditions, wages, fringe benefits, department rules and regulations, or interpretation and application of the collective bargaining agreement.

Date/Time Grievance occurred: _____

Have you attempted resolution on your own? Y / N

Did you have a meeting with your supervisor or department head? Y / N
If yes, with whom?

Grievance Topic (circle one): Working Conditions, Fringe Benefit, Wages, Rules/Regulations, Collective Bargaining Agreement, Other (specify).

Brief Narrative:

Grievant's Signature: _____ **Date:** _____

Received by: _____ **Date:** _____

DISPOSTION

Member's signature: _____ **Date:** _____

Received by: _____ **Date:** _____