## APPENDIX G

UC/UAW STEP 2 GRIEVANCE FORM	the UC/UAW A Labor Relations until the UAW h file a response.	Allegations of a violation of the UC/UAW Agreement covering Academic Researchers must be filed on this form. See the UC/UAW Agreement for details regarding the filing of a grievance. Forms must be submitted to the Campus Labor Relations Office. Pursuant to section 3567 of HEERA, UC shall not agree to resolution of the grievance until the UAW has received a copy of the grievance and the proposed resolution and has been given the opportunity to file a response. YOU MUST PROVIDE THE INFORMATION MARKED WITH AN ASTERISK (*) IN ACCORDANCE WITH ARTICLE 7, GRIEVANCE AND ARBITRATION, OR IT MAY BE INELIGIBLE FOR FURTHER PROCESSING							
GRIEVANT'S NAME *				LININ		EVANCE NUMBER (TO BE COMPLETED BY THE			
LAST	FIRST			MI UNIVERSITY)		(SITY)			
BARGAINING UNIT CLASSIFICATION TITLE (e.g. Assistant Speciali Project Scientist, etc.) *			GRIEVANT'S HIRING UNI/DEPARTMENT * GRIE			GRIEVA	NT'S HOME TELEPHONE NUMBER		
NAME OF GRIEVANT'S IMMEDIATE TELEPHONE NUMBER	E SUPERVISOR, TITLE	AND		NON-UNIVERSITY ADDRESS TO WHICH CORRESPONDENCE MAY BE SENT TO GRIEVANT [OR REPRESENTATIVE'S ADDRESS MAY BE USED] *					
REPRESENTATIVE'S NAME (IF RE				RESENTATIVE'S NON-UNIVERSITY TELEPHONE IBER					
REPRESENTATIVE'S MAILING ADDRESS, CITY, STATE, ZIP									
TYPE OF GRIEVANCE:				SPECIFIC ARTICLE(S), SECTION(S), & SUB-SECTION(S) OF THE UC/UAW AGREEMENT ALLEGED TO BE VIOLATED *					
VIOLATION(S) *				DATE OF INFORMAL STEP RESPONSE, ARE YOU MEETING				EQUESTING A STEP 2	
						YES	□ NO		
DESCRIPTION OF ALLEGED VIOLATION OF THE AGREEMENT.* PLEASE DESCRIBE IN DETAIL THE FACTS AND CIRCUMSTANCES (INCLUDING DATES) THAT EXPLAIN HOW THE ARTICLE(S) AND SECTION(S) WERE VIOLATED. (ATTACH SEPARATE SHEET OFPAPER IF NEEDED.)									
REMEDY REQUESTED *									
GRIEVANT'S SIGNATURE								DATE	
REPRESENTATIVE'S SIGNATURE (IF REPRESENTED)								DATE	