



TEAMSTERS LOCAL 2010 UNIVERSITY OF CALIFORNIA GRIEVANCE

Allegations of a violation of a contract in effect between the University and Teamsters Local 2010, must be filed on this form. See your contract for details regarding the filing of grievances.
ALL INFORMATION REQUESTED BELOW MUST BE PROVIDED EITHER PRINTED OR TYPED.

GRIEVANT NAME, Last, First, Middle Initial		GRIEVANT'S CLASSIFICATION TITLE	
GRIEVANT'S JOB LOCATION	CHOOSE ONE	GRIEVANT'S WORK TELEPHONE	BARGAINING UNIT
ADDRESS TO WHICH REQUIRED CORRESPONDENCE MAY BE SENT TO GRIEVANT			
TYPE OF GRIEVANCE (Union, Group, Individual)	DATE OF ACTION CAUSING GRIEVANCE	DATE OF INFORMAL DISCUSSION	CONTRACT ARTICLE/SECTION

IF REPRESENTED IN THIS GRIEVANCE, PROVIDE THE FOLLOWING:

REPRESENTATIVE'S NAME	REPRESENTATIVE'S ORGANIZATION	REPRESENTATIVE'S TELEPHONE NO.
REPRESENTATIVE'S ADDRESS (City, State, and Zip Code)		EMAIL

ALLEGED VIOLATION OF AGREEMENT	Set forth Section and provision allegedly violated; the action grieved and how it violated stated provisions; how grieving employee was adversely affected.

REMEDY REQUESTED	
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GRIEVANT SIGNATURE/DATE	REPRESENTATIVE SIGNATURE/DATE
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UNIVERSITY USE ONLY

LOCATION	UNIT	YEAR	NAME OF DESIGNATED GRIEVANCE OFFICER		
DATE RECEIVED	DELIVERY METHOD	INFORMAL REVIEW DATE	CAREER	FULL TIME	PROBATION
					REFERENCE NO.

			CASUAL	PART TIME	
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