

CITY OF MIAMI BEACH BARGAINING UNIT GRIEVANCE PROCEDURE FORM

UNION GRIEVANCE #: _____

LABOR RELATIONS GRIEVANCE #: _____

Instructions: Spaces 1-9 should be typed so that the same information appears at all steps. The lower portion is to be completed at each step.

1. Bargaining Unit (check one only):

FRATERNAL ORDER OF POLICE (FOP)
 AMERICAN FEDERATION OF STATE,
 COUNTY & MUNICIPAL EMPLOYEES (AFSCME)

INTERNATIONAL ASSOCIATION OF FIREFIGHTERS (IAFF)
 COMMUNICATIONS WORKERS OF AMERICA (CWA)
 GOVERNMENT SUPERVISORS ASSOCIATION OF FLORIDA (GSAF)

2. Date of Occurrence:

3. Employee's Name & Classification:

4. Employee's Department/Division & Telephone Ext. (____):

5. Employee's Immediate Supervisor & Telephone Ext. (____):

6. Statement/Nature of Grievance:

7. Contract Article(s) Alleged Violated:

8. Suggested Adjustment:

9. _____
 Employee Signature Date Union Representative's Signature Date

TO BE COMPLETED AND PRESENTED AT EACH STEP

_____ Step 1 - Presented by (signature/title) Date:	Received by (signature/title): _____ Date:
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STEP 1 RESPONSE (FROM DIVISION TO PRESENTER)

Grievance Denied (state why):
 Grievance Resolved (state how):

(signature/title) _____ Date:

_____ Step 2 - Presented by (signature/title) Date:	Received by (signature/title): _____ Date:
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STEP 2 RESPONSE (FROM DEPARTMENT TO PRESENTER)

Grievance Denied (state why):
 Grievance Resolved (state how):

(signature/title) _____ Date:

_____ Step 3 - Presented by (signature/title) Date:	Received by (signature/title): _____ Date:
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See Attached Reply to Step 3 from City Manager's Designee/Labor Relations

_____ ARBITRATION REQUEST/ Presented by (signature/title) Date:	Received by (signature/title): _____ Date:
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COMMUNICATIONS WORKERS OF AMERICA

LOCAL 3178

ELECTION OF REMEDY FORM

Grievance No. _____

This form must be completed and signed at the **initial** step of the grievance procedure. **Employee must elect, sign, and date only at the initial step of the grievance procedure:**

1. _____ **Grievance Procedure:**

I/We elect to utilize the Grievance Procedure contained in the current Contract between the City of Miami Beach, Florida, and Communications Workers of America (CWA). I understand that this choice precludes my utilization of the Personnel Board.

Signature

Date