



# B.C. GENERAL EMPLOYEES' UNION

## GRIEVANCE FORM INSTRUCTIONS

*All member personal information is private and confidential and only used for the express purpose of administrating the business of the union*

### Instructions to Stewards

1. There are 2 files to complete: the Grievance Form (**this file**) which contains **Sections A, B and Section C**, the Confidential BCGEU Steward Fact Sheet. Save these files separately.
2. Check your timelines – The completed grievance forms must be submitted to both the Union and the Employer within the grievance timelines described in your Collective agreement.
3. STEP 1 – Did you complete Step 1 of the grievance process as described in your Collective Agreement? If so, complete **Section B: Steward to Complete** with your contact information *and* the “STEP 1” section with the date of the Step 1 meeting, the name of the Employer’s Step 1 designate, and the Employer’s response.
4. Complete the Grievance form as follows:
  - a. Fill in as much of **Section A:** Grievor information as possible. You must provide the Grievor’s address, phone number and personal email address. This information is critical to ensure the Union can contact the Grievor.
  - b. Fill in the “Article Violated” and the “Date of Violation”. If you do not know this information, contact the Staff Representative.
  - c. In the “Details of the Grievance” provide a brief summary of the facts. Remember to include the who, what, where and when!
  - d. Complete the “Remedy Sought” by describing exactly what the Grievor wants. Add “To be made whole” to every remedy.
5. Complete **Section C:** Confidential BCGEU Steward Fact Sheet (second file) with as many details as possible.
6. Print or Save the following Grievance form file and send it to the Grievor for signature. Ask them to send you a copy of the signed form. ***Do not send the Section C: Confidential BCGEU Steward Fact Sheet file to the Grievor.***
7. Print or Save the following Grievance form file containing the Grievor’s signature. **Fill out the name of the Employer’s Step 2 designate in Section B: STEP 2** and send it to the Employer’s Step 2 designate for signature. Ask them to send you a copy of the signed form. ***Do not send the Section C: Confidential BCGEU Steward Fact Sheet file to the Employer.***
8. When you receive the fully signed Grievance Form, immediately send the Grievance Form containing Sections A, B and the Section C: Confidential BCGEU Steward Fact Sheet and any other relevant evidence or information to the area office by email, fax or mail.

FOR BCGEU OFFICE USE ONLY



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GRIEVANCE FORM

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SECTION A: GRIEVOR TO COMPLETE

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

LOCAL NO. \_\_\_\_\_ HOME PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

WORK ADDRESS: \_\_\_\_\_

WORK POSTAL CODE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ BRANCH / DEPT: \_\_\_\_\_

JOB CLASS: \_\_\_\_\_ REGULAR: \_\_\_\_\_ SENIORITY DATE: \_\_\_\_\_ AUXILIARY / TEMPORARY: \_\_\_\_\_ SENIORITY / START DATE: \_\_\_\_\_

ARTICLE (s) ALLEGEDLY VIOLATED: \_\_\_\_\_ DATE OF VIOLATION: \_\_\_\_\_

And any other related articles.

DETAILS OF GRIEVANCE: (include all relevant names, events, dates, times, etc.)

REMEDY SOUGHT: (be specific)

Please Note—

- A Under BCGEU collective agreements, the employer has agreed to refrain from negotiating with an aggrieved employee, either directly or indirectly, without the consent of the Union. Most BCGEU agreements also oblige the BCGEU to abandon any grievance, which the aggrieved employee(s) attempt to pursue through channels outside the negotiated grievance procedure.
- B This will authorize the President of the Union or designate to review my personnel files in order to facilitate the investigation of the grievance.

Grievor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

SECTION B: STEWARD TO COMPLETE:

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

POSTAL CODE \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

STEP 1

Grievance discussed with Employer's Step 1 designate: \_\_\_\_\_ Date: \_\_\_\_\_

Name and classification of designate: \_\_\_\_\_

Verbal Response at Step 1: \_\_\_\_\_

STEP 2

Grievance presented to Step 2 designate: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Signature of Designated Local Supervisor (indicating receipt of grievance)

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