

## GRIEVANCE CHECKLIST

THIS CHECKLIST SHOULD BE USED TO ENSURE A COMPLETE GRIEVANCE FILE. PLEASE CHECK OFF EACH ITEM TO MAKE SURE YOU HAVE THE INFORMATION REQUIRED.

THE FOLLOWING DOCUMENTATION MUST BE INCLUDED IN EACH GRIEVANCE FILE ALONG WITH THIS CHECKLIST:

- \_\_\_\_\_ COPY OF GRIEVANCE/DISCUSSION NOTIFICATION
- \_\_\_\_\_ LOCAL 1400 GRIEVANCE RECORD
- \_\_\_\_\_ ALL NOTES FROM GRIEVANCE MEETING
- \_\_\_\_\_ GRIEVANCE PREPARATION OUTLINE
- \_\_\_\_\_ COPIES OF EMAILS OR ANY WRITTEN NOTIFICATION FROM MANAGEMENT THAT SUPPORTS THE CASE

IN DISCIPLINE CASES THE FOLLOWING MUST ALSO BE INCLUDED:

- \_\_\_\_\_ GRIEVANT STATEMENT
- \_\_\_\_\_ COPY OF THE REQUEST FOR PERSONNEL RECORDS
- \_\_\_\_\_ ANY AND ALL PERSONNEL RECORDS (INCLUDING 1477, OBS, PERFORMANCE REVIEWS AND PLANS, ALL LETTERS IN FILE AND ANY MISCELLANEOUS RECORDS)
- \_\_\_\_\_ COPY OF SECTION OF CODE OF CONDUCT OBTAINED FROM MANAGEMENT IF APPLICABLE
- \_\_\_\_\_ STATEMENT FROM WITNESSES, IF ANY

IN ANY CASE INVOLVING DISABILITY, DISABILITY PAY, FMLA OR A CHRONIC MEDICAL CONDITION, THE FOLLOWING MUST ALSO BE INCLUDED:

- \_\_\_\_\_ SIGNED COPY OF THE REQUEST FOR MEDICAL RECORDS
- \_\_\_\_\_ ANY SUPPORTING MEDICAL DOCUMENTATION THE MEMBER HAS AVAILABLE