



NALC
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GRIEVANT NOTIFICATION FORM

Grievant: _____ Grievance #: _____

Office: Cherry Hill / Sicklerville / Medford Steward: _____

GATS # (IF ANY): _____ Issue: _____

PDI GRIEVANT INITIALS: _____ DATE: _____

OUTCOME: _____

INFORMAL A MEETING GRIEVANT INITIALS: _____ DATE: _____

OUTCOME: _____

FORMAL A MEETING GRIEVANT INITIALS: _____ DATE: _____

OUTCOME: _____

STEP B GRIEVANT INITIALS: _____ DATE: _____

OUTCOME: _____

ARBITRATION GRIEVANT INITIALS: _____ DATE: _____

OUTCOME: _____

