

**GRIEVANCE REPORT**

**STEP #** \_\_\_\_\_

\*\*\*\*\*

**LOCAL 509, SERVICE EMPLOYEES INTERNATIONAL UNION**

400 Talcott Ave., Bldg 131, 2<sup>nd</sup> fl.  
Watertown, MA 02472  
(617) 924-8509

150 Fearing St.  
Amherst, MA 01002  
(413) 549-7348

\*\*\*\*\*

**TO:** \_\_\_\_\_

**FROM:** \_\_\_\_\_  
(Grievant's Name and/or Name of the Union)

**SS#:** \_\_\_\_\_

**AGENCY:** \_\_\_\_\_

**JOB TITLE:** \_\_\_\_\_

**WORK LOCATION:** \_\_\_\_\_

**VIOLATIONS:** The Employer is in violation of Article(s) \_\_\_\_\_  
and other relevant provisions of the Agreement. (Fill in)

**NATURE OF THE GRIEVANCE:** (Use additional page, if necessary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PROPOSED SOLUTION TO GRIEVANCE:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

and all other such relief that is deemed just and proper.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Grievant and/or Steward and/or Union Rep.