

# **NALC** **BRANCH** **210**

Date of Infraction:\_\_\_\_\_ Date of Grievance:\_\_\_\_\_

Grievants Name:
Grievants Address:
Grievants Phone Number:
Work Location:
Stewards Name:
Supervisors Name:

**Informal Denial**  
**Worksheet**  
**To be Used For**  
**Stewards Notes**

**COMPLETE AND**  
**ATTACH TO THE**  
**JOINT STEP A GRIEVANCE FORM**

**Issue Statement:**

**Undisputed Facts:**

**Disputed Facts (Union Full and Detailed Statement) (Use Separate Paper if Necessary):**

**Managements Response to the Grievance (Take Notes):**

**Remedy Requested:**