

# Grievance and Investigatory FACTS COLLECTION WORKSHEET

**Grievant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

For IBEW Local Union use only

**Steward:** \_\_\_\_\_

NAME(s)

**Company  
Interviewer:** \_\_\_\_\_

Name

Title

Dept

Work Phone

**Company  
Interviewer:** \_\_\_\_\_

Name

Title

Dept.

Work Phone

## Grievant Information

Last Name	First Name	Local Union
Address		
City	State	Zip
Home Phone	Cell Phone	Home Email
Dept.	Job Class	Wage Rate
Work Loc	Mail Code	Co Email
Work Phone	Shift	Supervisor
Hire Date	Dept Seniority Date	

**WHO** is involved? (witnesses, management, personnel, grievant)

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**WHEN** did the problem(s) occur? (Is more than one specific time involved?)

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**WHERE** did the problem(s) occur? (More than one location?)

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