GRIEVANCE REPORT FORM

Providence Teachers Union, AFT 958, AFL-CIO

PLEASE 1. Print or type.
2. Present your grievance in writing to the Union office.
3. Attach separate sheets of paper if you need additional space.

Day ..... Date ..... of the Occurrences of the Grievance.

Day ..... Date ..... Teacher Presented Grievance to Union Office.

Teacher's Name: ..... Home Tel. No. .....

Mailing Address: .....

School: ..... School Tel. No. .....

STATEMENT OF GRIEVANCE (Please state the names of all parties and the facts involved.)

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CORRECTIVE ACTION REQUESTED (Please be specific.)

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(Signature of Aggrieved) (Day) (Date)