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# SOUTHWEST AIRLINES/TWU GRIEVANCE FORM

Case Number \_\_\_\_\_

(Complete at Station/Provisioning Level - Please Print)

Obtain From TWU

Grievant Name \_\_\_\_\_ Location \_\_\_\_\_ Employee Number \_\_\_\_\_

Company Seniority Date \_\_\_\_\_ Classification Seniority Date \_\_\_\_\_ Phone Number (Home) \_\_\_\_\_

Position \_\_\_\_\_ Immediate Supervisor \_\_\_\_\_

Date Of Incident \_\_\_\_\_ Date Reviewed with Local Management \_\_\_\_\_

Date Grievance Filed \_\_\_\_\_ Specific Article(s) Involved \_\_\_\_\_

Employee Statement of Grievance: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Remedy or Settlement Sought: \_\_\_\_\_

\_\_\_\_\_

I hereby authorize TWU to act in my behalf in the disposition and settlement of this grievance.

Grievant Signature \_\_\_\_\_ Date \_\_\_\_\_

For the Union \_\_\_\_\_ (TWU Representative/Designee Signature)

Date Grievance Forwarded to Department or Assistant Manager \_\_\_\_\_

Decision: \_\_\_\_\_

\_\_\_\_\_

Department or Assistant Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

TWU Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

Settlement Accepted: Yes \_\_\_\_\_ No \_\_\_\_\_

Date Forwarded to Station or Provisioning Manager or Designee: \_\_\_\_\_

Decision: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Station Manager Signature \_\_\_\_\_ Date Forward: \_\_\_\_\_

TWU Representative Signature \_\_\_\_\_ Date Forward: \_\_\_\_\_

Settlement Accepted: Yes \_\_\_\_\_ No \_\_\_\_\_

Forwarded to General Office: Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_

Referred to District Representative: Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_