

CWA GRIEVANCE FORM FOR AT&T OPERATIONS BARGAINING UNIT

Local _____

Grievance Numbers:

Local _____ C&T _____ Company _____

Incident Date ____/____/____ Grievance filed ____/____/____

Grievant(s) Name(s) _____ attitud _____

Contractual Job Title _____ NCS Date ____/____/____

ORG _____ Rate of Pay/Wage Level \$ _____

Work Location _____ City/State _____

Work Phone # (____) _____ Home Phone # (____) _____

Steward _____ Work Phone # (____) _____

Contract Articles (if any) _____

Issue or Condition creating the grievance _____

Remedy Sought _____

| <u>Date</u> | <u>Date</u> | <u>In Attendance</u> | <u>Date of</u> |
|------------------|----------------|----------------------|------------------------|
| <u>Meeting</u> | <u>Meeting</u> | <u>At Meeting</u> | <u>Company Written</u> |
| <u>Requested</u> | <u>Held</u> | <u>At Meeting</u> | <u>Response</u> |
| <u>Step 1</u> * | | <u>Union</u> | <u>Company</u> |
| ____/____/____ | ____/____/____ | _____ | _____ |
| | | _____ | ____/____/____ |

* Step 1 may be waived only by parties hearing Step 2 grievances (Art. 9.2).

| | | | |
|-----------------|----------------|--------------|----------------|
| <u>Step 2</u> * | | <u>Union</u> | <u>Company</u> |
| ____/____/____ | ____/____/____ | _____ | _____ |
| | | _____ | ____/____/____ |

* Step 2 may be waived only by parties hearing Step 3 grievances (Art. 9.2).

Step 3 Appeal notification sent to _____ on ____/____/____

Final Disposition _____

Grievant's Statement _____

(use additional pages if necessary)

Signature of Grievant _____ Date _____

Home Address _____
(Grievant must keep the Union advised of address changes)

RELEASE OF PERSONNEL AND/OR MEDICAL RECORDS

I, _____, the undersigned, do hereby grant permission for all Union Representatives involved to examine, review and obtain copies, when necessary, of any and all portions of my personnel and/or medical records maintained by the Company, which are necessary to process a grievance in my behalf.

I understand all information and discussions of a personal nature pertaining to these records or copies of same will be held in strict confidence unless otherwise stated by me.

SIGNED _____ DATE ____/____/____

I. FACTS

A clear statement of exactly what happened that caused the grievance. True facts, not opinion.

II. RELEVANT CONTRACT PROVISION

Cite the contract provision which is under dispute, or state the past practice which is under debate. Cite actual contract language, if possible.

III. COMPANY POSITION

What is the argument against the grievance at prior steps of the grievance procedure?

IV. UNION POSITION

What is our argument for the grievance at prior steps of the grievance procedure?

V. DISCUSSION AND RECOMMENDATION

Why do you feel this case should go to the Third Step and how can the Union best win the dispute?

Signed: Local President _____

The background information should include some reference to the following:

- A. What happened on both sides during the grievance meetings? Grievance forms and grievance meeting minutes will satisfy this request; however, if an important point is made, it should be highlighted.
- B. If there is a past practice involved, describe past practice and cite any previous use of the disputed practice; document it, if possible.
- C. Is bargaining history relevant to the grievance? If so, document this and include it in the file.
- D. In cases where witnesses are of value, you should obtain statements or affidavits from all involved.
- E. Make note of the fact if a grievant or the Local has filed a charge with EEOC, NLRB, FEPC or any other government agency.
- F. Be sure to include all personnel and medical records, if relevant.
- G. In cases involving occupational health and safety, be sure to document all scientific or technical aspects related to the issue. If this requires such things as the testing of hazardous substances, it should be pursued and included in the file.
- H. Make formal request for all information the Local deems relevant to assist in processing the grievance.
- I. Case files need all possible evidence and grievance meeting minutes in order to be complete. Please investigate the grievance fully and include all data and information which you deem necessary and pertinent.

INSTRUCTIONS FOR COMPLETING STEP 3 GRIEVANCE APPEAL FORMS

AT&T – LEGACY T – LONG FORM

1. Grievance Numbers:
 - Local** - Provide the Local grievance # if the Local has a numbering system for their grievances. If not, leave this line blank.
 - C&T** - Leave blank. This number is assigned by the C&T office after the form is sent to the C&T office.
 - Company** - Leave blank. This number is provided by the Company after the form is sent to the C&T office.
2. Incident Date – Provide the date on which the contract violation occurred.
3. Grievance Filed – Provide the date on which the grievance was originally filed.
4. Grievant (s) Name – Provide the Grievant (s) name. If this is an et al grievance (more than one Grievant with same issue) provide the name under which the grievance will be filed and include a list naming the additional Grievants.
5. hrid– Provide the Grievant (s) HRID (assigned by AT&T).
6. Contractual Job Title - Job Title – Provide the Grievant (s) Job Title.
7. NCS Date – Provide the Grievant (s) Net Credited Service Date.
8. ORG - Provide the Grievant (s) Organization/Business Unit/Division.
9. Rate of Pay/Wage Level – Provide the Grievant (s) base rate of pay or wage level (i.e., TG5).
10. Work Location: Provide the Grievant (s) work location - street address, City, and State.
11. Work Phone # - Provide the Grievant (s) work phone #.
12. Home Phone # - Provide the Grievant (s) home phone #.
13. Steward – Provide the name of the Steward filing the grievance.
14. Work Phone # - Provide the Steward’s work phone #.
15. Contract Articles (if any) – Provide the contract Articles under which the violation occurred.
16. Issue or Condition creating the grievance – Provide the grievance issue (i.e., management performing Bargaining Unit work).
17. Remedy Sought – Provide the remedy the Grievant is seeking and always ask that the Grievant be made whole.
18. Step 1:
 - a. Date Meeting Requested – Provide the date of the Step 1 meeting request was made to the Company.
 - b. Date Meeting Held – Provide the date of the Step 1 meeting.
 - c. In Attendance – Union - Provide the name of the Union Rep. at Step 1.
 - d. In Attendance – Company - Provide the name of the Company Rep. at Step 1.
 - e. Date of Company Written Response – Provide the date of the Company’s Step 1 denial letter.
19. Step 2:

- a. Date Meeting Requested – Provide the date of the Step 2 meeting request was made to the Company.
 - b. Date Meeting Held – Provide the date of the Step 2 meeting.
 - c. In Attendance – Union - Provide the name of the Union Rep. at Step 2.
 - d. In Attendance – Company - Provide the name of the Company Rep. at Step 2.
 - e. Date of Company Written Response – Provide the date of the Company’s Step 2 denial letter.
20. Step 3 Appeal notification sent to – Provide the name of the Staff to whom the Step 3 Appeal was sent and on what date the appeal was sent.
 21. Final Disposition – To be filled out by the Local for their files - Document the disposition of the grievance at Step 3 (i.e., withdrawn, appealed to arbitration, settled).
 22. Grievant’s Statement – The Grievant should be required to provide a written statement providing more detailed explanation of the grievance issue and requested resolve (the Grievant can attach additional pages if necessary).
 23. Signature of Grievant/Date – Grievant is required to sign and date their statement.
 24. Home Address – Grievant must provide their home address and must notify the Union of any address changes.
 25. RELEASE OF PERSONAL AND/OR MEDICAL RECORDS – Grievant must sign and date this release to allow the Union to examine, review and make copies of their personnel and/or medical records as necessary to process their grievance.
 26. I FACTS – Explanation provided on the form.
 27. II RELEVANT CONTRACT PROVISION – Explanation provided on the form.
 28. III COMPANY POSITION - Explanation is provided on the form.
 29. IV UNION POSITION - Explanation is provided on the form.
 30. DISCUSSION AND RECOMMENDATION – Explanation is provided on the form.
 31. **Signed: Local President** – The Local President must sign this form.
 32. Letters A-I instruct the Local as to what the background information should include.

GRIEVANCE PROCESS INFORMATION

- Locals must mail or fax Step 3 Appeal Form(s) to the C&T Office. In accordance with Article 9.1 of the contract between AT&T Corp. and CWA, “Notice of the grievance appeal shall be in writing and delivered to the Director of Labor Relations or his or her designated representative not later than thirty (30) calendar days after the Company notifies the Union of its decision at Step 2.” Therefore, appeals must be received in the C&T office no later than 30 calendar days from the date of the Company’s Step 2 denial letter. Appeals received after the 30 day window will be considered. **NOTE: Appeals received after business hours on a Friday, or the day before a Holiday, will not be processed until the office reopens for business.**

- Upon receipt of the Step 3 appeal, the form is faxed to the Director of Labor Relations and a confirmation is sent to the Local. Receipt of the Local's grievance file is expected shortly thereafter, but should be received within two weeks from the date the Step 3 Appeal Form is received in the C&T office.

The mailing address for the C&T office is: CWA, Communications & Technologies, 501 3rd Street, NW, Washington, DC 20001-2797. The fax numbers for the C&T office are (202) 434-1307 and (202) 434-1308.

NOTE: Step 3 Appeals for discipline cases must be sent to the appropriate District office for processing. The same requirements apply and the Company contacts are the same.