

Grievance No. _____

**PJM SOUTH
EMPLOYEE GRIEVANCE**

1. To _____
Department Head Department/Plant Location

2. The Grievance stated under item 3 was discussed with _____ on _____
Supervisor Date

and was not satisfactorily resolved. A meeting is requested for further discussion on this complaint under the grievance procedure.

3. **Statement of Grievance** (Supply facts, dates and give exact nature of complaint — use reverse side if additional space is required.):

Settlement:

Article provision(s) in question: Article _____ Section _____ Item _____

4. Is this a Grievance by a Grievance Committee? Yes No

5. _____
Employee's Name Employee Signature Date
(Please print)

Steward or Chief Steward's Name Signature Date
(Please print)

Third member of Grievance Committee Signature Date
if applicable

6. **Distribution: (1) copy to Department Head, (1) copy to the Human Resources Manager, and (1) copy to Union Representative.**

Received by Department Head _____ Under the Agreement, Article 17, Section 17.5 a meeting
Name/Date

is held within ten (10) calendar days from the date of receipt of the grievance.