

# GRIEVANCE FORM & PUBLIC RECORDS REQUEST CHAPTER 119



## FEDERATION OF PUBLIC EMPLOYEES

*A division of the National Federation of Public & Private Employees  
Affiliated with District 1 -MEBA (AFI-CIO)  
1700 N.W. 66<sup>th</sup> Avenue \* Suite 100-B, Plantation, Florida 33313  
Office (954) 797-7575 Fax (954) 797-2922*



---

<b>Employer</b>	<b>Employer Phone</b>	<b>Grievance</b>	<b>Date</b>
<b>Member's Name</b>	<b>Location/Dept</b>	<b>Classification</b>	
<b>Member's Address</b>		<b>Phone:</b>	
<b>Immediate Supervisor's Name</b>		<b>Phone:</b>	

---

1. **Employee's Statement of Grievance:**
  2. **Specify the Article's of the Agreement which is/are violated:**
  3. **What is the remedy and/or relief sought?**
- 

Please allow this letter to serve as the Federation's formal request for the following relevant and necessary information:

- |  |  |
|--|--|
| <input type="checkbox"/> All documents relied on in imposing discipline  | <input type="checkbox"/> Witness statements                    |
| <input type="checkbox"/> Employee evaluations; discipline  | <input type="checkbox"/> Job descriptions for grievant         |
| <input type="checkbox"/> All time cards for the last ___ months  | <input type="checkbox"/> Personnel file (see attached release) |
| <input type="checkbox"/> All memoranda/emails, video tapes, cd-roms, floppy disks pertaining to the above-listed | <input type="checkbox"/> Other:                                |

I hereby authorize the Federation of Public Employees to act for me in the disposition and settling of this grievance.

Date _____	Employee Signature _____
Date _____	Steward's Signature _____
Date _____	Representative's Signature _____

---

