

Grievor name: \_\_\_\_\_ Local contact: \_\_\_\_\_

**Please indicate the nature of the grievance:**

- Sexual harassment
- Discrimination based on prohibited grounds (race, gender, sexual orientation, religion, etc.)
- Discrimination based on union activity
- Failure to accommodate (illness, disability, pregnancy, etc.)

**Have you included:**

- Investigation information (completed or not, WDHP report?)
- Details of the accommodation needed where appropriate
- Medical reports if available and relevant
- All employer replies to the union
- A clear chronology of events leading to the grievance
- Clear details about the allegations if a harassment/discrimination issue
- Name and phone numbers for relevant contact persons

**Employer's stated position:**

**Union's stated position:**

**Any settlement proposed? By whom?**