

This form is one of many ways that a grievance may be withdrawn. A grievance may be withdrawn by contacting us in many ways, including by mail, fax, email, or a verbal conversation.

If you wish to withdraw your grievance with this form, please fill out the information below:

OPSEU/SEFPO File number:	
Date (on Grievance Form): (mm/dd/yyyy)	Local number:
Grievor Name (first and last):	
Email:	Phone number:
□ I wish to withdraw my grievance. I understand that this is irrevocable.	
Signature:	Date: (mm/dd/yyyy)

Please provide this form to the local representative (such as the local president or steward) or the staff member (for example, the staff representative or grievance officer) that has been assisting you. Otherwise please email it to <u>grievance@opseu.org</u>.