State of Wisconsin Office of State Employment Relations OSER-DCLR-25 (Rev. 5/01)

 □ 3

Grievance Step - Check one

PDF FILLABLE VERSION					No for Agency use only		
	Classification				Pargaining Unit		
Name - Last, First, Middle Initial		Classification					
	Fundada a Halt			Work Unit			
				Work Onit			
Work Unit Telephone		Headquarters location			Shift or Hours of Work		
ARTICLE				Type of grievance (check one):		Individual	
& SECTION				1		Group	
of the labor agreement.					evance, names of	Union	
1	e and classifica classifications	e and classification of spokes classifications of other grieva Classification Employing Ur Headquarters ARTICLE	e and classification of spokesperson and classifications of other grievants. Classification Employing Unit Headquarters location	e and classification of spokesperson and classifications of other grievants.	e and classification of spokesperson and classifications of other grievants.	e and classification of spokesperson and classifications of other grievants. No for Agency use only Classification Bargaining Unit Employing Unit Work Unit Headquarters location Shift or Hours of Work ARTICLE Type of grievance (check one):	

Describe the grievance - state all facts, including time, place of incident, names of persons involved, etc.

Relief sought

Employee's Signature	Employee Representative's Signature	Date Submitted
Employee's Mailing Address	Employee Representative's Mailing Address	

Employer's Decision

Employer's Signature	Title	Date Received	Date Returned

INSTRUCTIONS

Individual employees have the right to present grievances in person or through representatives of their own choosing at any step of the grievance procedure.

In the event that the employee is not satisfied with the supervisor's written decision, or if the supervisor does not return an answer within the time limits set out in the collective bargaining agreement, to be considered further, the grievance must be appealed to the next higher step or appealed to arbitration within the time limits set forth in the agreement.

GRIEVANCE MUST BE FILED ON THIS FORM OR OSER-DCLR-25

Complete this report following instructions. Print, sign and date form. Keep one copy and submit original and one copy to the proper representative of your employer. Electronic submittal of this form is not authorized.

See your collective bargaining agreement for time limits for presenting and acting on grievances. Failure to observe these time limits will result in loss of appeal rights. These time limits may be extended only by mutual agreement.