



**Local # 18**  
**United Government Security Officers of America**  
**UGSOA**  
**GRIEVANCE FORM**



Date Filed: \_\_\_\_\_ Local #: **18** Grievance #: \_\_\_\_\_

Name of the Aggrieved: \_\_\_\_\_

Crew: \_\_\_\_\_ Department: **Security** Phone #: **8971**

Section of Contract Violated \_\_\_\_\_ Article: \_\_\_\_\_ Section: \_\_\_\_\_

Description of Grievance: \_\_\_\_\_

Adjustment Desired: \_\_\_\_\_

Signature of Aggrieved and/or Steward: \_\_\_\_\_

Date Grievance Occurred: \_\_\_\_\_

Step #1 (within 21 calendar days submit in writing to Security Shift Supervisor)

Date Submitted: \_\_\_\_\_ Date Answer Received: \_\_\_\_\_

Step #2 (if grievance is not resolved at Step #1, submit within 10 days)

Date Submitted: \_\_\_\_\_ Date Answer Received: \_\_\_\_\_

Date Grievance package referred to UGSOA International: \_\_\_\_\_

Intent to invoke Arbitration (if necessary)

Local Presidents Signature: \_\_\_\_\_ Date: \_\_\_\_\_