

UNITED FACULTY OF MIAMI-DADE COLLEGE

Arbitration Request/Demand

Date: _____

Case No. _____

To: _____
Vice Provost of Human Resources

Campus: _____ Room: _____

From: _____ Faculty Member/Grievant

This serves as the demand/request for arbitration to the parties' collective bargaining agreement. Contact the union president for arbitration selection.

Check as Appropriate:

- () By Hand Delivery By _____
- () By Fax Delivery By _____
- () By Interoffice/Mail By _____

Cc: Union Grievance Chair
Union Headquarters
Grievant