

SHOP STEWARD FACT SHEET

This fact sheet will help you collect information on an issue or problem. Be concise and to the point, but don't leave out important information. Leave sections blank if they are not applicable, and attach extra sheets as needed.

A. THE PARTIES

Shop Stoward

1. Shop Steward	
Name:	Phone:
Home Email:	Local:
2. Griever/Complainant (If more	than one, attach list with contact info for each)
Name:	Phone:
Address:	
Home Email:	
3. Supervisor, Manager, or Ot	thers Involved
Name:	Phone:
Job Title:	Email:
Name:	Phone:
Job Title:	
Name:	Phone:
Job Title:	
Relation to griever:	

B. FACTS OF THE COMPLAINT OR GRIEVANCE

What happened? (Brief summary)	
Why this is considered a complaint or grievance: (Include the article of the	collective
agreement, employer policy, or section of legislation, if applicable.)	

Details of the complaint
a) When did it occur (times and dates)?
b) Where did it occur (location, department, or section)?
c) Who is involved and were there witnesses? Please list.
d) Any related documents? (Attach copies when possible)
e) Does the complaint involve human rights issues? (e.g. harassment or bullying refusing unsafe work, or accommodation due to religion, family status, or a disability)
f) Corrective action (what is the member requesting?)

C. ADDITIONAL COMMENTS