



**Office and Professional Employees
International Union, Local 2**

Kaiser Permanente OPEIU, Local 2

Shop Steward Grievance Resolution Form

Date Grievance Filed	Date of Occurrence	Corrective Action Level
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L1 / L2 / L3 / L4 / L5

OPEIU, Local 2 Grievant Name:

Attachment(s) : Grievance Form

: Decision Notice

Center:

Department:

Supervisor Name:

Shop Steward Name:

Grievance Status	Decision/Remedy/Comment
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Settled

Date:

Withdrawn by:

Union

Shop Steward

Grievant

Date:

Communication was sent to the following:

- Withdrew/Resolved
- Grievant
- Settled
- Sandy Smith Contract Specialist
- Mike Cowan, OPEIU, Local 2
- Head Steward: _____: DC/SM NOVA BALT
- HRC: (name):

Steward Signature/Date:

Sandy Received: _____/ Date:

Update in Grievance Tracker: _____/ Date:

Comment

Please use back of sheet for additional information