

Date and time submitted: _____
(Within ten (10) calendar days of receipt of Step 2 response)

Appeal: _____

Signatures of those present:

FNA	MANAGEMENT
_____	_____

Date and time Step 2 grievance presented:

Department Head's response (Within ten (10) calendar days of from the date of the Step 2 meeting):

Signatures of those present:

FNA	MANAGEMENT
_____	_____

STEP THREE

Written grievance submitted to: _____
(Print Name of Director of Human Resources)

Date and time submitted: _____
(Within ten (10) calendar days of receipt of Step 2 response)

Appeal: _____

Signatures of those present:

FNA	MANAGEMENT
_____	_____

Date and time Step 3 grievance presented:

Department Head's response (Within ten (10) calendar days of from the date of the Step 3 meeting):

Signatures of those present:

FNA

MANAGEMENT

STEP FOUR

Notification of intent to arbitrate by: _____
(Signature)

Date notification sent: _____