



REQUEST FOR STEWARD TIME

TO: _____, Supervisor

FROM: _____, Shop Steward / designee

Unit _____

DELIVERED TO: _____

DATE RECEIVED BY MANAGEMENT: ___/___/___

I request that paid time be made available to me on _____(date) to investigate or process a grievance or discuss contractual language.

Names of Employees to be in attendance:

I believe the amount of paid time that I will need will be approximately _____.
(Please refer to your unit's CBA for details regarding leave time)

Thank you for your cooperation.

Shop Steward

Date

Paid time will be made available on ___/___/___ at _____ am/pm
Date Time

Supervisor's Signature: _____