



Step 2 Interview with Grievor/Fact Sheet

Grievor's Data — please complete, circle and check as appropriate

Grievor's Name: _____ Home Phone: _____

Worksite: _____ Cell Phone: _____

Unit: _____ BCNU # or SIN: _____ E-mail: _____

Current Status: FT PT Casual Other How long have you been in this position?: _____

Immediate supervisor's name _____ Title: _____

Brief educational history _____

Where else have you worked? (Brief summary of positions/duties until present) _____

What issue(s) is in dispute? _____

When (Chronology of dates) did this happen? _____

Who was there or who may be affected?

Name: _____ Unit: _____ Job Title: _____

Connection to issue: _____

The BCNU will collect, use and may disclose personal information and employee personal information about you for the purpose of representing you and assisting you in a grievance under the terms of the Provincial Collective Agreement. The information you provide is only for use in the grievance process and is protected from unauthorized disclosure outside the grievance process by section 17 of the *Personal Information and Protection of Privacy Act*.

Name: _____ Unit: _____ Job Title: _____

Connection to issue: _____

Name: _____ Unit: _____ Job Title: _____

Connection to issue: _____

Name: _____ Unit: _____ Job Title: _____

Connection to issue: _____

Step 1 (Ask member to provide the following details of Step 1 grievance procedure)

Did you talk to the immediate supervisor about this issue? Y N Date: _____

Was anyone else at this meeting (please provide names)? _____

What did you say to try to get this resolved and what was your supervisor's response?

Did you or management document (letters, notes, minutes) this meeting? Y N

Were there any other investigative meetings? Y N Explain: _____

Have you had any other problems at work? Y N Explain: _____

What would a resolution of this grievance look like? Name as many concrete solutions as possible.

Would other BCNU members be affected by this resolution? Y N

Steward Note: Obtain written permission to access grievor's personnel file Y N

Next Steps/Action Plan:

Name of Steward: _____ Date: _____