

Interviewing the Member - Role Play Instructions

Steward

Information given to steward describes all you know about the problem. You should use the **Steward Fact sheet** as a guide in this process. To the interview with the member, you are bringing both your human relations skills and your problem-solving skills.

Member

Information given to steward is what the steward already knows about your problem. *Information the steward must obtain from the member* contains details the steward needs to find out about before s/he can advise you on how to proceed. Adopt a character - either yourself as you would likely behave in this situation, or someone you know. Be realistic. If your problem sheet does not provide sufficient information for you to respond to the steward's questions, improvise.

Observer

Make a note of any techniques or approaches of the steward that you found effective, and suggestions on what the steward could try differently another time.

During the feedback, everyone should share:

- (i) how you felt when you played the role of the member - e.g., how you felt about the steward; what you liked about the steward's approach/attitude; what suggestions you might have for things the steward could try differently another time;

- (ii) how you felt in the role of the steward - e.g., how you felt about the member; what you found particularly challenging and how you addressed that challenge; what you felt were your strong points; what you saw as your weak points and how you think you can improve upon your skills; and
- (iii) your observations, as described above in the observer's role.

Grievance Form Formulaire de griefs

[illegible]



Grievance Transmittal Form

Formulaire de transmission des griefs

EMPLOYER'S GRIEVANCE NO. / N° DE GRIEF DE L'EMPLOYEUR : _____

SECTION 1

Level 2 Palier 2	Level 3 Palier 3	Other Levels Autres paliers
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SECTION 2

TO BE COMPLETED BY EMPLOYEE

À REMPLIR PAR L'EMPLOYÉ (E)

Surname Nom de famille	Given names Prénoms	Telephone No. N° de téléphone
Employer, Department or agency Employeur, ministère ou organisme	Branch/division/section Direction/division/section	Work location Lieu de travail
_____ Employee signature Signature de l'employé(e) _____ Date		

SECTION 3

TO BE COMPLETED BY BARGAINING AGENT REPRESENTATIVE

À REMPLIR PAR LE REPRÉSENTANT DE L'AGENT NÉGOCIATEUR

Approval for presentation of grievance and agreement to represent employee are hereby given Par la présente, j'autorise la présentation du grief et j'accepte de représenter l'employé(e)		
_____ Signature of bargaining agent representative Signature du représentant de l'agent négociateur		_____ Date
Bargaining agent Agent négociateur	Bargaining unit/component Unité de négociation/Élément	
Name of local bargaining agent representative Nom du représentant local de l'agent négociateur	Telephone No. N° de téléphone	Facsimile No. N° de télécopieur
Address for contact Adresse aux fins de communication		E-mail address Adresse électronique

SECTION 4

TO BE COMPLETED BY IMMEDIATE SUPERVISOR OR LOCAL OFFICER IN CHARGE

À REMPLIR PAR LE SUPERVISEUR IMMÉDIAT OU LE RESPONSABLE LOCAL

Name and title of management representative Nom et titre du représentant de la direction	Date transmittal received Date de réception de la transmission
Signature	

Once completed and signed by all parties copies to be distributed as follows:: copy to Employee, copy to Bargaining Agent, copy to the Employer/copie au employeur

Une fois que le formulaire est rempli et signé par toutes les parties, en remettre une copie à la partie plaignante, au représentant de l'agent négociateur et au représentant de l'employeur.



GRIEVANCE FORM		Reference No
SECTION 1 - TO BE COMPLETED BY EMPLOYEE		
Surname	Given Names	Telephone
Home Address		Job Classification
Department or Agency		Work Location
Statement of Grievance (Quote collective agreement reference where applicable) I am grieving the unfair treatment I have received from our Administrative Officer - Mrs. White. I would like to know why I was not paid overtime for the extra hours I worked June 15th. I started work at 8:30 a.m. and only took my usual lunch and coffee breaks. I did not leave the office until 8:00 p.m. I have witnesses to prove it and am willing to supply their names if necessary. When I approached my supervisor, she told me to take up the matter with the Administrative Officer. When I spoke to Mrs. White about it, she was very rude and told me there was nothing she could do about it.		
Corrective Action Requested I request a complete review of the situation, a full explanation and an apology in writing from the Administrative Officer.		
Signature:		Date:
SECTION 2 - TO BE COMPLETED BY REPRESENTATIVE OF BARGAINING AGENT		
Approval for presentation of grievance and agreement to represent employee are hereby given		
Signature:		Date:
Name of Local Representative of Bargaining Agent		Telephone
Address for Contact		
SECTION 3 - TO BE COMPLETED BY IMMEDIATE SUPERVISOR OR LOCAL OFFICER IN CHARGE		
Title of Management Representative		Date Received
Signature:		

Sample Grievance Wording

LANGUAGE FOR A STATEMENT OF DUTIES GRIEVANCE

Details of Grievance:

I grieve the employer's failure to provide me with a complete and current statement of duties and responsibilities of my position. This violates my collective agreement.

Corrective Action:

That I be provided with a complete and current statement of the duties and responsibilities, including point rating by factor of my position effective from ***** date.

LANGUAGE FOR A CLASSIFICATION GRIEVANCE

Details of Grievance:

My position is incorrectly classified at present.

Corrective Action:

That my position be reclassified to a higher classification level effective X date.

LANGUAGE FOR ACTING PAY GRIEVANCE

Details of Grievance:

I grieve that the employer is not paying me appropriately for the duties I am performing. I am asked to perform the duties of a higher position. As a result, the employer is not following the provision of my collective agreement.

Corrective Action:

That I be paid in accordance with my collective agreement for the performance of the duties mentioned above, retroactive to the date on which performance of these duties began (specify date—or, if the acting was for a specified period indicate from and to dates).

LANGUAGE FOR DISCIPLINARY GRIEVANCE

Details of Grievance:

I grieve the employer's decision to impose *****

Corrective Action:

I want the decision rescinded. I want all money owed to be reimbursed. I want to be made whole. I want all documentation in relation to this action to be stricken from my file.

LANGUAGE FOR TERMINATION/DEMOTION GRIEVANCE

Details of Grievance:

I grieve the employer's decision to terminate/demote me.

Corrective Action:

I want to be reinstated to my former group and classification level. I want all money and benefits owed to be reimbursed. I want to be made whole. I want all documentation in relation to this action to be stricken from my file.

LANGUAGE FOR REJECTION ON PROBATION GRIEVANCE

Details of Grievance:

I grieve the employer's decision to terminate me.

Corrective Action:

I want to be reinstated to my former group and classification level. I want all money owed to be reimbursed. I want to be made whole. I want all documentation in relation to this action to be stricken from my file.

Grievances on rejection on probation have to go through all levels of the grievance procedure unless both parties agree to bypass a level.