

For Official Use Only

Date of Record \_\_\_\_\_

Copy to Respondent:  
\_\_\_\_\_

Official's Printed Name  
\_\_\_\_\_

Official's Signature  
\_\_\_\_\_

**ILA Local # 2078**  
**Grievance Form**

***Please Note the Following***

- Print legibly or complete form on a computer or mobile device.
- Attach additional copies of documents as necessary.
- Sign and return the original form to ILA Local 2078 (Manatee) union hall.
- Please keep a copy of this form and all documents for your records.
- If your complaint / grievance deals with harassment, discrimination, or retaliation and you need assistance in completing this form, please call the union hall at (813) 229 - 7932.
- A copy of this grievance / complaint must be provided to the respondent as proof of notification.
- Incidents occurring at the Docks / Workplace will be heard by the Manatee Grievance Committee
- Incidents occurring at the ILA hiring hall, parking lot and /or sounding areas will be heard by The Trustee Board. Upon completion, "Submit Form", link below.

# The Grievance / Complaint

1. Email Address \_\_\_\_\_

2. Name \_\_\_\_\_

3. Name(s) of individuals in the grievance / complaint.

(a) \_\_\_\_\_ (b) \_\_\_\_\_

(c) \_\_\_\_\_ (d) \_\_\_\_\_

4. Date of Incident \_\_\_\_\_ Time \_\_\_\_\_ Company \_\_\_\_\_

5. Ship Foreman \_\_\_\_\_ Header \_\_\_\_\_

Describe your complaint or grievance. But sure to include a statement of the facts. In detail.

6. Dock Foreman \_\_\_\_\_

7. Witness(es) (1) \_\_\_\_\_ (2) \_\_\_\_\_

(3) \_\_\_\_\_ (4) \_\_\_\_\_

8. Describe your complaint / grievance in detail. Be sure to include a statement of the facts. (Who, What, When and Why. Please attach copies of any related documents).

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