

Pennsylvania State Troopers Association GRIEVANCE SUMMARY FORM

1. Grievant Name		2. Grievance No.	
3. Home Address		4. City, State, Zip	
5. Troop/Bureau		6. Station/Division	
8. Work Number		9. Home Number	
		7. Employee Number	
		10. Cell number	

PLEASE READ IMPORTANT INSTRUCTIONS BEFORE SIGNING

This Grievance Summary Form must be completed, signed and included with all grievances received by the PSTA. If a Grievance Summary Form has not been submitted, the grievant will be contacted and advised that the form was not received. A grievance will not be processed further until the Grievance Summary Form is received. Complete instructions on how to complete a Grievance Form and Grievance Summary Form can be found at www.PSTA.org, or by contacting your PSTA Lodge President or Station Representative.

CONTRACT GRIEVANCES

Step One: The grievant must complete a grievance form and submit the completed grievance form to their Troop Commander/Bureau Director within fifteen (15) calendar days of the date of the alleged violation or when the grievant learned of the alleged violation.

Step Two: To appeal a grievance denied at Step One, the grievant must appeal within five (5) calendar days to Step Two. The completed grievance form must be postmarked or hand delivered within the five (5) calendar days to: **Grievance Coordinator, Bureau of Labor Relations, 404 Finance Building, Harrisburg, PA 17120-0018.**

The grievant must also furnish a copy of the grievance to: **PSTA Office, 3625 Vartan Way, Harrisburg, PA 17110-9439.** The grievant should attach all correspondence deemed important for the Grievance Board to review in order to consider your grievance (i.e. Specialized Position Postings, Personnel Orders, Weekly Duty Rosters, etc.). The completed and signed Grievance Summary Form must be included with the copy of the Grievance Form sent to the PSTA.

DISCIPLINE GRIEVANCES

Step Two: Within 15 calendar days of receipt of Notice of Disciplinary Penalty, the grievant must complete a grievance form. The completed grievance form must be postmarked or hand delivered within fifteen (15) calendar days to: **Grievance Coordinator, Bureau of Labor Relations, 404 Finance Building, Harrisburg, PA 17120-0018.**

The grievant must also furnish a copy of the grievance to: **PSTA Office, 3625 Vartan Way, Harrisburg, PA 17110-9439.** Additionally, the grievant must include a copy of The Disciplinary Action Report (DAR), Summary Report of Personnel Investigation, and Notice of Disciplinary Penalty. The grievant may also include correspondence, directed to the Grievance Board, including any other information the grievant would like the board to consider in processing the grievance. The completed and signed Grievance Summary Form must be included with the copy of the Grievance Form sent to the PSTA.

HEART & LUNG GRIEVANCES

Step Two: Within 15 calendar days of receipt of any notification of denial or termination of Heart & Lung Benefits, the grievant must complete a grievance form. The completed grievance form must be postmarked or hand delivered within fifteen (15) calendar days to: **Grievance Coordinator, Bureau of Labor Relations, 404 Finance Building, Harrisburg, PA 17120-0018.**

The grievant must also furnish a copy of the grievance to: **PSTA Office, 3625 Vartan Way, Harrisburg, PA 17110-9439.** Additionally, the grievant should include a copy of all medical reports pertaining to the injury or condition. The grievant may also include correspondence, directed to the Grievance Board, including any other information the grievant would like the board to consider in processing the grievance. The completed and signed Grievance Summary Form must be included with the copy of the Grievance Form sent to the PSTA.

All grievances will be reviewed by the Grievance Board as per the PSTA contract and PSTA bylaw guidelines. If a grievance is accepted by the grievance board, it will then be reviewed jointly with the Office of Administration. If a settlement is not obtained, the grievance may then be scheduled for binding arbitration. All accepted grievances for arbitration will be presented by a Solicitor of the Pennsylvania State Troopers Association.

All time limitations, with reference to filing and/or appealing grievances are mandatory, unless extensions are agreed upon by both sides. It is the grievant's responsibility to file grievance(s) timely and to properly appeal a Step 1 decision to Step 2. It is the responsibility of the Grievant to ensure that all forms are completed accurately, timely, and properly submitted. It is the responsibility of the grievant to provide all necessary information in order for the grievance to be processed.

The grievant must inform the PSTA office as far in advance as possible of any pre-scheduled annual leave, personal days, etc., that could interfere with the scheduling of an arbitration hearing.

I hereby acknowledge that I have read this form and that I have been provided with all instructions for filing a grievance. I further acknowledge that I have provided the PSTA Grievance Board with all information I have that would assist in the processing of this grievance. I hereby acknowledge and understand that I must follow the procedures, guidelines and by-laws of the Pennsylvania State Troopers Association and the Collective Bargaining Agreement Between the Pennsylvania State Troopers Association and the Commonwealth of Pennsylvania in order for my grievance to be considered.

Signed _____ Date: _____
(Grievant)