



City of Long Beach
 LONG BEACH FIREFIGHTERS ASSOCIATION

FORMAL GRIEVANCE FORM

To Be Completed by Grievant

Grievant:

Classification:

Assignment:

Phone #:

NATURE OF GRIEVANCE (attach additional page if necessary)

Explanation of Grievance:

Time and Place, if known:

Violation, Misinterpretation, or Misapplication of (MOU Article & Section, Policy, Procedure, etc.):

Corrective Action Desired:

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INFORMAL STAGE

Person Contacted: _____

Date: _____

Date of Informal Response: _____

Representative

Grievant Signature: _____

Signature: _____

Step 1—Battalion Chief

Date Received: _____

Meeting/Response Date: _____

Step 1 Comments (cannot be resolved at this step):

Battalion Chief Signature: _____

Date: _____

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To Be Completed by Grievant

Grievance resolved ; moved to Step 2

Grievant Signature: _____

Date: _____

Step 2—Assistant Chief or Deputy Chief

Date Received: _____

Meeting/Response Date: _____

Step 2 Comments (cannot be resolved at this step):

Assistant Chief/Deputy Chief Signature: _____

Date: _____

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To Be Completed by Grievant

Grievance resolved ; moved to Step 3

Grievant Signature: _____

Date: _____

Step 3—Fire Chief or Designee

Date Received: _____

Meeting/Response Date: _____

Step 3 Comments (cannot be resolved at this step):

Fire Chief/Designee Signature: _____

Date: _____

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To Be Completed by Grievant

Grievance resolved ; moved to Step 4

Grievant Signature: _____

Date: _____

Step 4—Human Resources or Designee

Date Received: _____

Meeting/Response Date: _____

Step 4 Comments (cannot be resolved at this step):

HR Director/Designee Signature: _____

Date: _____

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To Be Completed by Grievant

Grievance resolved ; moved to Step 5

Grievant Signature: _____

Date: _____

Step 5—City Manager or Designee

Date Received: _____

Meeting/Response Date: _____

Step 5 Comments (cannot be resolved at this step):

City Manager/Designee Signature: _____

Date: _____

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To Be Completed by Grievant

Grievance resolved ; moved to Step 6

Grievant Signature: _____

Date: _____

Step 6—Arbitration

Date Received: _____

Meeting Date: _____

Date Submission Agreement Submitted to Arbitration: _____

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COMMENTS

1. At each step of the grievance process that the grievant is dissatisfied with the decision of the respondent, the grievant must submit the grievance to the next step within 15 calendar days for further consideration.
2. At each step of the grievance procedure through Step 5, the respondent shall, within 15 calendar days, schedule a meeting and/or provide written response to the grievant.
3. If the matter is submitted to arbitration under Step 6, the definition of issues, selection of arbitrator and conduct of the hearing shall be governed by the language of the MOU.
4. The grievant shall copy this *Formal Grievance Form* with all prior responses to the recipient at each subsequent step.
5. For tracking purposes, a copy of the *Formal Grievance Form* with all prior responses shall be copied to the Fire Administration Bureau.