



CWA Local 3112 Records Request Form

Company Representative: _____ Date: _____

Records requested by: _____

Grievant's name: _____

The Union requests the following information relevant to above named grievant:

CPSG records (including cover sheet)

_____ Service Records
_____ Accident Records
_____ Attendance Reports
_____ Training Records
_____ Evaluations
_____ All B-Forms

Job Performance

_____ Monthly Score Cards
_____ Dates: _____
_____ Daily Score Cards
_____ Dates: _____
_____ DLETH
_____ Dates: _____
_____ Unit Comparison w/ Corresponding Discipline

Overtime

_____ Overtime Equalization Reports
_____ Dates: _____
_____ Daily OT for Date: _____
_____ Daily OT Messages _____

Misconduct

_____ Company Practice in Question
_____ Witness Statements
_____ Security Investigation Report

Safety

_____ Accident Investigation
_____ Safety Inspections
_____ Safety Practice in Question
_____ Safety Coverage's
_____ Witness Statements
_____ Unit Comparison w/ Corresponding Discipline
_____ Discipline

Attendance

_____ Attendance Policy
_____ Current Year Attendance
_____ Report 1001-Employee Attendance
_____ All FMLA Correspondence
_____ Report 1002-Vacation Balance
_____ Unit Comparison w/ Corresponding Discipline

Other

_____ Schedules
_____ Stand-by Schedules
_____ All Documentation Related to Discipline _____ Grievant release signature attached

* The Union reserves the right to request further information