

**GRIEVANCE PROCEEDINGS
JUDICIAL BRANCH**

JD-ES-28 Rev. 2-09

Instructions

Refer to your collective bargaining agreement under the "Grievance Procedure" article for instructions regarding the submission of this form.

STATE OF CONNECTICUT
JUDICIAL BRANCH
www.jud.ct.gov



Name of Grievant	Name and Location of Court or Office		
Title of Grievant	Bargaining Unit	Division or Unit	Shift <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd

Grievance

Date of Alleged Violation	Specific Contract Provisions Violated <i>(Give article and section number)</i>
State Facts and Issues Involved <i>(Attach additional sheets if necessary)</i>	

State Specific Remedy or Relief Sought *(Attach additional sheets if necessary)*

I hereby declare that all statements made herein are true and accurate to the best of my knowledge and I desire representation as follows:

☐ I will represent myself.

☐ My representative will be:

Name and Title of Representative

Signed *(Grievant)*



Date Signed

Signed *(Representative)*

Date Signed

Answer 1

Answer To Above Grievance *(Attach additional sheets if necessary)*

Date Received	Date of Meeting	Date of Response	Signed <i>(First Supervisor outside bargaining unit)</i>
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☐ I acknowledge settlement of my grievance.

☐ I appeal the decision and request review and response by my department head.

Signed *(Grievant)*



Date Signed

Signed *(Union representative)*

Date Signed

Answer 2

Answer To Above Grievance *(Attach additional sheets if necessary)*

Date Received	Date of Meeting	Date of Response	Signed <i>(Department head or designee)</i>
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☐ I acknowledge settlement of my grievance.

☐ I appeal the decision and request review and response by the Chief Court Administrator or designee.

Signed *(Grievant)*



Date Signed

Signed *(Union representative)*

Date Signed

Answer 3

Answer To Above Grievance *(Attach additional sheets if necessary)*

Date Received	Date of Meeting	Date of Response	Signed <i>(Chief Court Administrator or designee)</i>
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