

# SOUTHWEST AIRLINES/TWU LOCAL 555 GRIEVANCE FORM

Obtain From TWU 555 Office 1-800-595-7672

Complete at Station Level - Please Print

Case Number: \_\_\_\_\_

Grievant Name \_\_\_\_\_

Location \_\_\_\_\_

Employee Number \_\_\_\_\_

/

Company Seniority Date \_\_\_\_\_ Classification Seniority Date \_\_\_\_\_

Phone Number \_\_\_\_\_ I agree to receive SMS text message updates about my  
case from the Union. Message & data rates may apply.  
Yes No Reply STOP at anytime to stop receiving messages.

Position \_\_\_\_\_

Text Message Consent \_\_\_\_\_

Date Of Incident \_\_\_\_\_

Email Address \_\_\_\_\_

Date Grievance Filed \_\_\_\_\_

Specific Article(s) Involved \_\_\_\_\_

Employee Statement of Grievance: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Remedy or Settlement Sought: \_\_\_\_\_

\_\_\_\_\_

I hereby authorize TWU to act on my behalf in the disposition and settlement of this grievance.

Grievant Signature \_\_\_\_\_

Date \_\_\_\_\_

TWU Representative/Designee Signature \_\_\_\_\_

Date Grievance Forwarded to Department or Assistant Manager or Designee: \_\_\_\_\_

Decision: \_\_\_\_\_

\_\_\_\_\_

Department or Assistant Manager or Designee Signature: \_\_\_\_\_ Date \_\_\_\_\_

TWU Representative Signature: \_\_\_\_\_ Date \_\_\_\_\_

Settlement Accepted: YES ☐ NO ☐

Date Grievance Forwarded to Station or Provisioning Manager or Designee: \_\_\_\_\_

Decision: \_\_\_\_\_

\_\_\_\_\_

Station Manager Signature: \_\_\_\_\_ Date \_\_\_\_\_

TWU Local 555 Representative Signature: \_\_\_\_\_ Date \_\_\_\_\_

Settlement Accepted: YES ☐ NO ☐

Forwarded to Local 555 Office: Yes ☐ No ☐ Date \_\_\_\_\_

Referred to District Representative: Yes ☐ No ☐ Date \_\_\_\_\_