EA FORM 4

(9-28-17)

**EA INFORMATION FORM TO BE COMPLETED BY EACH GRIEVANT**

***(FOR EA INTERNAL OFFICIAL USE ONLY)***

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Labor Relations Specialist\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TVA Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TVA Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Employment\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please explain your grievance or problem in as much detail as possible. (If additional space is required, please continue on back.)

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If an information meeting has been held with TVA concerning this matter, please outline what happened.

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What would be an acceptable resolution to your grievance?

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Has TVA given you any reasons why your request cannot be granted?

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Have you previously filed any grievances or EEO complaints since working for TVA?

If yes, please explain.

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Please list any disciplinary actions taken against you in the past (i.e. warning letter, suspension, termination, oral warning, etc.)

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Please use the following space to list any additional information you feel is pertinent to your grievance.

Please attach any relevant information such as memos, service reviews, job descriptions, etc. which may have a bearing on this case and return to:

**EA**

**MS 34-K**