

Report to Trustee

Date: _____

Level:

Primary Intermediate Middle High Specialist

Rep's name: _____ Building: _____

Home e-mail or phone: _____ Applicable CPA article #: _____

Name of member(s) with concern: _____

Member's home e-mail or phone: _____

Concern: _____

What has been done so far? _____

Outcome:

Resolved Not resolved - possible grievance Referred to bargaining team Not a contract issue

Report back date: _____