

GOVERNMENT SUPERVISORS ASSOCIATION
OF FLORIDA, OPEIU, LOCAL 100
ELECTION OF REMEDY FORM

Grievance No. _____

This form must be completed and signed at the first step of the grievance procedure.

Employee must elect, sign, and date only one of the two following choices:

1. _____ I/We elect to utilize the Grievance Procedure contained in the current Agreement between the City of Miami Beach, Florida, and Government Supervisors Association of Florida, OPEIU, Local 100. I understand that this choice precludes my utilization of Option Number 2.

Employee Signature

Date

2. _____ I/We elect to utilize another forum for my/our grievance, and in doing so, I/we permanently waive my/our contractual right to the Grievance Procedure contained in the current labor Agreement between the City of Miami Beach and Government Supervisors Association of Florida, OPEIU, Local 100. Any resolution of a grievance from another forum cannot be inconsistent with the terms of the collective bargaining agreement that is in effect.

Employee Signature

Date

RWB:lsg
a:GSAF-CTR.98/GSAF9820.CTR.