

Local Grievance # _____

Issue Statement (Block 15 of PS Form 8190):

Did management violate Article 41, Section 2.B.4. of the National Agreement by not allowing City Carrier Assistant (CCA) **[name]** to opt on route **[route #]** for **[date(s)]** in the **[Installation name]** Installation, and if so, what should the remedy be?

Union Facts and Contentions (Block 17 of PS Form 8190)

Facts:

1. CCA **[name]** placed a bid for an opt/hold-down on Route **[route #]** on **[date]**.
2. Route **[route #]** is a full-time duty assignment of anticipated duration of five days or more in the delivery unit where CCA **[name]** is assigned.
3. Route **[route #]** was not opted on by any eligible career employee.
4. Management denied an opt/hold-down request on route **[route #]** from CCA **[name]**.
5. **[Name]** was the CCA with highest in relative standing to opt on route **[route #]**.

Contentions:

1. Management violated Article 41, Section 2.B.4. of the National Agreement when they denied an opt/hold down request on Route **[route #]** on **[date(s)]**.
2. CCA **[name]** has the right under Article 41.2.B.4 to exercise his/her preference for an opt/hold-down on route **[route #]** in the delivery unit he/she is assigned which was vacated for an anticipated duration of five days or more.
3. The union contends route **[route #]** was not selected by any eligible career employee as an opt/hold down.
4. Article 41.2.B.4 of the National Agreement reads in pertinent part:

“ City carrier assistants may exercise their preference (by use of their relative standing as defined in Section 1.f of the General

Principles for the Non-Career Complement in the Das Award) for available full-time craft duty assignments of anticipated duration of five (5) days or more in the delivery unit to which they are assigned that are not selected by eligible career employees.”

Remedy (Block 19 of PS Form 8190):

1. That management cease and desist violations of Article 41.2.B. 4 of the National Agreement at the **[Installation name]** Installation.
2. That CCA **[name]** be paid a lump sum equal to the difference between the number of hours he/she actually worked and the number of hours he/she would have worked had the opt/hold-down been properly awarded. This payment is to also include any out of schedule premium pay that results from the change in work schedules.
3. As an incentive to ensure future compliance, City Carrier Assistant **[name]** be paid a lump sum of \$100.00.
4. That all payments associated with this case be made as soon as administratively possible, and/or any other remedy the Step B Team or an Arbitrator deems appropriate.



National Association of Letter Carriers Request for Information

To: _____
(Manager/Supervisor)

Date _____

(Station/Post Office)

Manager/Supervisor _____,

Pursuant to Articles 17 and 31 of the National Agreement, I am requesting the following information to investigate a grievance concerning a violation of Article 41:

1. A copy of the letter carrier work schedule for the week(s) of **[date(s)]**.
2. A copy of the Employee Everything Report for CCA **[name]** for **[date(s)]**.
3. A copy of the award sheet for all hold down(s)/opt(s) for the week(s) of **[date(s)]**.
4. A copy of the request to opt/hold-down route **[route#]** submitted by CCA **[name]**.
5. A copy of the CCA relative standing roster at the **[Installation name]** Installation.

I'm also requesting time to interview the following individuals:

1. **[name(s)]** at the **[Installation name]** Installation.

Your cooperation in this matter will be greatly appreciated. If you have any questions concerning this request, or if I may be of assistance to you in some other way, please feel free to contact me.

Sincerely,

_____ Request received by: _____

Shop Steward
NALC

Date: _____



National Association of Letter Carriers Request for Steward Time

To: _____ Date: _____
(Manager/Supervisor)

(Station/Post Office)

Manager/Supervisor _____,

Pursuant to Article 17 of the National Agreement, I am requesting the following steward time to investigate a grievance. I anticipate needing approximately _____ (hours/minutes) of steward time, which needs to be scheduled no later than _____ in order to ensure the timelines established in Article 15 are met. In the event more steward time is needed, I will inform you as soon as possible.

Your cooperation in this matter will be greatly appreciated. If you have any questions concerning this request, or if I may be of assistance to you in some other way, please feel free to contact me.

Sincerely,

_____ Request received by: _____
Shop Steward
NALC
Date: _____