

<b>TRACKING NUMBER (REQUIRED)</b>	<i>ADMINISTRATIVE USE ONLY</i>	<i>PSC USE ONLY</i>
<input type="checkbox"/> <b>POLICY/DISCRIMINATION</b> (FILE TO PUBLIC SERVICE COMMISSION)	<input type="checkbox"/> <b>GROUP</b> (FILE TO 1 <sup>ST</sup> LEVEL MANAGEMENT)	<input type="checkbox"/> <b>INDIVIDUAL – 3<sup>RD</sup> LEVEL</b> (FILE TO DEPUTY MINISTER)

<b>EMPLOYEE NAME:</b>			
<i>DEPARTMENT</i>	<i>BRANCH</i>	<i>WORK LOCATION</i>	<i>WORK PHONE</i>
<i>UNION REPRESENTATIVE</i>	<i>LOCAL</i>	<i>WORK PHONE</i>	<i>EMAIL ADDRESS</i>
<b>SUMMARY OF ISSUE</b>			
<b>REDRESS REQUESTED</b>			
<i>SIGNATURE OF EMPLOYEE:</i>		<i>SIGNATURE OF UNION REPRESENTATIVE:</i>	
<i>RECEIVING PARTY</i>	<i>SIGNATURE OF RECEIVING PARTY</i>	<i>DATE RECEIVED:</i>	
<b>DISTRIBUTION:</b>			
<input type="checkbox"/> PUBLIC SERVICE COMMISSION, OR <input type="checkbox"/> 1 <sup>ST</sup> LEVEL MANAGER, OR (MANAGER sends copy to DEPARTMENT H.R.) <input type="checkbox"/> DEPUTY MINISTER, AND (DM's Office sends copy to DEPARTMENT H.R.) <input type="checkbox"/> PSC – LABOUR RELATIONS (LRB sends copy to DEPARTMENT H.R.)			

<b>DATE OF HEARING:</b>		
<i>DECISION DATE:</i>	<i>DECISION MADE BY (NAME):</i>	<input type="checkbox"/> UPHELD <input type="checkbox"/> DENIED
<input type="checkbox"/> RESOLVED <input type="checkbox"/> UNRESOLVED, Referred to Adjudication (YEU sends notice to Public Service Commissioner)		<i>DATE:</i>

