



AFSCME Council 5 Grievance Waiver Form

Name of issue in dispute (i.e. discipline, language, etc):

I (grievant name) _____ hereby waive my rights to pursue a grievance under my collective bargaining agreement.

Signature of Grievant

Date

We (local name and number) _____
do not wish to pursue a grievance in the above matter.

Signature of Local Leader/Steward

Date

Please provide a copy of this grievance waiver form to your local Field Representative.