

EXTENDING TIME LIMITS REQUEST FORM
Use this form, when an extension is needed, to process a grievance.
Type of Violation: 12/05/2014 1.6.B Settlement and/or Extension for Providing Names
Date Violation Occurred:
Place Where Violation Occurred:
Grievant's Name:
Grievant's Work Location:
Step of the Grievance Procedure:
Print Steward's Name:
Print USPS Representative's Name:
We the undersigned parties mutually agree to extend the time limits on this grievance through _____ (Insert the Date). Extension of the time limits will bar either party from citing this grievance as being untimely.
_____ USPS Representative's Signature & Date
_____ APWU Steward's Signature & Date

Local will choose order of preference by annotating between 1 - 3

- () Email Address:
- () Fax Number:
- () Mailing Address: