

DATE: TIIVIE	OF WIEETING:
EMPLOYEE INFORMATION	UNION & COMPANY INFORMATION
MEMBER NAME:	UNION REP:
EMPLOYEE NUMBER:	DURING INVESTIGATION REMEMBER THE 5 W'S:
SENIORITY DATE:	WHO / WHAT / WHEN / WHERE / WHY
STATUS: PART TIME FULL TIME	
EMAIL ADDRESS (NOT AC):	MANAGER(S):
PHONE NUMBER (CANADIAN NUMBER):	LOCATION OF MEETING:

NOTES: (Please initial speakers on notes)