APPLICATION FOR SERVICES OF A PANEL AND HEARING UNDER ARTICLE X, SECTION 3, OF THE STANDARD FORM OF UNION AGREEMENT

Names and Addresses of Parties to Dispute		
(a)		
		_
Phone:	Fax:	E-mail:
		EMPLOYER
(b)		
Phone:	Fax:	E-mail:
1 HOHC	1 dx	LOCAL UNION

2. Nature of Dispute: Give brief statement of pertinent facts, including dates, position of parties involved and relevant provisions of involved Union Agreement or addenda thereto.

3.	Attach all of the following. Complete checklist before mailing to ensure that all information is enclosed. Assemble the information in sets so that each of your 6 packets contains one (1) copy of each separate item.		
	☐ Six (6) copies of the application.		
	☐ Six (6) copies of the involved collective bargaining agreement and addenda.		
	Six (6) copies of minutes of Local Joint Adjustment Board, if applicable, signed by one representative of Management and one representative of Labor. (If minutes are verbatim, give summary only and hold verbatim minutes for the use of the panel – attach Summary as Exhibit.)		
	☐ Six (6) copies of the findings and decision of the LJAB.		
4	. Date of hearing before the Local Joint Adjustment Board.		
	(a) All applications with documents shall be filed with the National Joint Adjustment Board.		
	Date:		
	<u></u>		
	Employer		
	Local Union		
	this submission is not signed by both parties, by signing below, I certify that I have provided a opy of this submission to the other party to this dispute.		
	 		
	Name		
	Date		

YOUR ATTENTION IS DIRECTED TO PARAGRAPH 2 OF THE PROCEDURAL RULES OF THE NATIONAL JOINT ADJUSTMENT BOARD WHICH PROVIDES THAT HEARINGS SHALL BE CONFINED TO THE RECORD MADE BEFORE THE HEARING PANEL. IT IS THUS IMPORTANT THAT *ALL* OF THE INFORMATION CALLED FOR IN THIS APPLICATION BE FILED IF THE RECORD IS TO BE COMPLETE.