

Date: \_\_\_\_\_

## HOURS INVESTIGATION FORM

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Employer: \_\_\_\_\_

Seniority: \_\_\_\_\_ Seniority Unit: \_\_\_\_\_

Classification: CHW 1 / CHW 2 / Other: \_\_\_\_\_ Status: (Regular or Casual): \_\_\_\_\_

How long was hole in schedule: Over 7 days: \_\_\_\_\_ Under 7 Days: \_\_\_\_\_

Were replacement hours offered: Yes: \_\_\_\_\_ No: \_\_\_\_\_ How many hours were offered? \_\_\_\_\_

Weekly Posted Hours (i.e. 40, 35, 27): \_\_\_\_\_

Window (e.g.: 8 - 6) \_\_\_\_\_ Days of Work (e.g.: Tuesday – Saturday) \_\_\_\_\_

Casual Availability: \_\_\_\_\_

### **Specifics of Complaint**

1. Date(s) that you were not given your weekly posted hours.  
\_\_\_\_\_

2. Date(s) and times of gaps.  
\_\_\_\_\_

3. Name of supervisor you spoke to and the date(s) you talked to him/her regarding lack of hours or had gaps in your schedule.  
\_\_\_\_\_  
\_\_\_\_\_

4. Attach copies of schedule(s) if possible (please delete client's names), or write down your schedule for the day(s)/week(s) in question. (e.g.: October 23, 9 - 11 – Mr. S., 11 - 1 Mrs. D., etc.)  
\_\_\_\_\_  
\_\_\_\_\_

5. List any days that you were not available to work and the reason (e.g.: LOA, sick day, turned down work, employer left message on answering machine, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

***Please fill out and submit to your Shop Steward once you have completed the form.  
Keep a copy for your records!***

Investigation – Employer to Complete

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

### **Hours Adjustment sent to Payroll:**

Date: \_\_\_\_\_ Signed: Employer: \_\_\_\_\_ Union: \_\_\_\_\_

\_\_\_\_\_ Employer Copy \_\_\_\_\_ Steward Copy \_\_\_\_\_ Grievance Copy (If applicable) \_\_\_\_\_ Voicemail to employee informing investigation complete