

Steward Use Only

Date Form Given to Steward Name of Steward **Grievance Number**

LOCAL 251: 9.5 RIGHTS DOCUMENTATION FORM

INSTRUCTIONS TO MEMBERS

Article 37 of the contract provides you with protections if you are continuously worked more than 9.5 hours a day. Local 251 has produced this form to help you document 9.5 violations and enforce your rights. Exercising your 9.5 rights is a two-step process. It is critical to follow and document these steps. Note: Additional restrictions apply to Cover Drivers. Consult your steward or business agent for more information or go to www.teamsterslocal251.org for more information.

Step One: Use this form to document a single work week in which you worked three days over 9.5 hours. Go with your steward and inform the Center Manager that you want to be put on the Opt-In list. Once you are on the Opt In list you will stay on the list for five (5) months, excluding Nov. and Dec. (Once five months have passed, excluding Nov. and Dec., you will be removed from the Opt In list and you will have to re-qualify by working three days over 9.5 hours in one work week and requesting to be put back on the list.) You must already be on the Opt In list before you can proceed to Step Two and file a grievance

Step Two: Once you are on the Opt In list, you are eligible to file a grievance every time you work three days over 9.5 hours in a single work week. Talk to your shop steward to file a grievance for penalty pay and to get your load adjusted.

Name of	member making	g report (Please pr	int)) Phone #			
Address		City		State	Zip		
Center	iter R		oute	Date of Hire Pay			
Fill out t	his form to do	cument the days	that you worked n	nore than 9.5 hours	on three or more day	ys in one week.	
Day	Date	Route	Start Time	Lunch	End Time	Hours Worked	
Mon							
Tues							
Wed							
Thurs							
Fri							
Manager list for fiv grievance	that the membe we months—and e. If the manage	r wants to be on the large refuses to add the	ne Opt In list. Use the or your records. The he member to the Op	ne section below to de member must be opt In list, document the	n the Opt In list to be neir refusal and file a g	ber will be added to the e able to file a 9.5 grievance.	
company hours wo	comply with Arked over 9.5 h	rticle 37 which cal ours/day. If the co	lls for the company to company agrees to re-	to adjust the driver's solve the problem, no	work schedule and pa	nager to request that the y triple time pay for . If the Company does	
Name of Center Manager:				Date/Time of Meeting			
Interview	notes (Use bac	k if needed)					
	Step One Meet	C	llowing five months	(Circle) Jan Feb M:	arch April Mav June	July Aug. Sept Oct.	

Note: 9.5 rights cannot be exercised in Nov. and Dec. These months do NOT count toward the 5-month period that the member is on the Opt In list.