SLH PROTEST

Shop Stewards;
All of the following information has to be provided in order to process the protest and send it to the International to be put on the SLH Protest Panel Docket.

- Member fills out the protest page.
- Member fills out the request in writing page.
- Member writes a statement why they believe the Dr. Note request is not warranted. Example: Has brought a Dr. Note every time they have called in sick.
- Member or Steward presents the request in writing to the Lost Time CSM.
- When the CSM delivers the request in writing and the C-21 & C-23 (which is being asked for on the request in writing page the member fills out) the steward sends the complete package to the Hall.
- With statement from member, reason in writing and C-21 & C-23 that should suffice in explaining the situation, if in the view of the Steward more information is needed than the Steward should provide a statement explaining such.
- **Do not send anything to the Hall until you have everything that is needed and everything is complete.**
SLH PROTEST

Today's date __________

To: Vice Presidents Local 513 and _____________________________
   (Print name of Lost Time CSM)

I, _____________________________, _____________________________ protest to the Sick
   (Print Employee's Name)    (Employee Number)
   Leave Harassment Panel, the company's placing me on a ninety (90) day
   doctors slip requirement per the Agreement between the Transport Workers
   Union and American Airlines.

Signed _____________________________
Address _____________________________
City/State/Zip _____________________________
Home Phone _____________________________
Steward _____________________________
   (Print name of steward that is representing you)

Cc: TWU, Local 513
REQUEST IN WRITING

Today’s date __________

To: __________________________________________
   (Print name of Lost Time CSM)

I, ____________________________________________, ____________________________
   (Print Employee’s Name) (Employee Number) request in writing the specific reasons the company suspects me of sick
   leave abuse and has placed me on a ninety (90) day doctors slip requirement, effective __________ per the Agreement between the Transport Workers
   (Date)
   Union and American Airlines. I also request a copy of my C-21 and C-23
documentation that is for the time period that I am being suspected of abuse.

Signed ____________________________________________
Address ____________________________________________
City/State/Zip _______________________________________
Home Phone __________________________________________
Steward _____________________________________________
   (Print name of steward that is representing you)

Cc: TWU, Local 513