APPENDIX A

REQUEST TO LEAVE ASSIGNED WORK AREA
TO PERFORM REPRESENTATIONAL DUTIES

This requests official time to conduct representational duties.

_____ _____ _____
DATE TIME SIGNATURE

Purpose of Request (check one):

Grievance Investigation: ☐ FLRA Proceeding: ☐

Grievance Processing: ☐ FSIP Proceeding: ☐

Labor Management Meetings: ☐ Other (Specify): _____

Negotiations: ☐

_____

Approved _____ Disapproved _____
(Explanation/Alternate Time)

_____

_____

_____

_____
SIGNATURE OF SUPERVISOR

Time Out _____ Time in _____ Time Used _____