



Instructions for: Grievance Presentation

Form

A member is entitled to present a grievance in writing at each of the two levels of the grievance process. The Grievance Presentation form 6439 is the approved RCMP form to be used by a grievor to initiate the grievance process.

Instructions

If this form is completed by hand, please ensure that it is legible. Completing this form should take 15 minutes or less.

Save, print and send the completed form to the OCGA, or grievor's supervisor, by mail (registered, regular or internal (please note that the date of presentation of the grievance is the date it is received at the OCGA and not the date on which it was mailed unless the grievor has clear proof of the date it was mailed)), e-mail, fax, deliver by hand, or courier. If the grievor (or his or her representative) sends this form electronically, it must be accompanied by an electronic message identifying the sender as the grievor or representative. The grievor's or representative's e-mail address will replace the signature on the form.

Please send the completed form by e-mail to the OCGA at RCMP.RecourseOCGA-RecoursBCGA.GRC@rcmp-grc.gc.ca.

If the grievor or grievor's representative presents a grievance to the initial or final level directly to the OCGA, he or she does not need to obtain the grievor's supervisor's signature on the form or inform him or her of the grievance presentation.

At the first level of the grievance process, the grievor, or their representative, must present the form to the OCGA or, when not possible, to the grievor's supervisor, within 30 days after the day on which the grievor reasonably knew or should have known of the decision, act or omission aggravating him or her. If a representative has been authorized to act on behalf of the grievor, include an e-mail or document indicating that authorization from the grievor. If the representative is an RCMP employee (with the exception of SRRs), include his or her Line Officer's written authorization to represent the grievor.

A grievor may object in writing, at the time of presenting a grievance to the OCGA, to the provision of the grievance materials to the respondent's line officer. The grievor must provide reasons for the objection.

- An adjudicator may request submissions before deciding whether to reject or allow the objection.
- If the objection is allowed, the adjudicator may direct the OCGA to provide the grievance and any related materials to an alternate line officer.

At the second and final level of the grievance process, the grievor must complete the section related to the final level and present the form to the OCGA, or the grievor's supervisor, within 14 days from the date of service of the initial level decision.

For more information on how to present a grievance and complete the form, please consult the [National Guidebook - Grievances Procedures](#).

Important Notes

This form will be included in the grievance file forwarded to the adjudicator.

Under the [RCMP Act](#), information written on this form will be collected and used for statistical and internal purposes such as the Personal Information Bank CMP/P-PE-804.

Definitions

Grievor: means a member who presents a grievance.

Initial Level: means the first level in the grievance process.

Final Level: means the second and final level in the grievance process.

Line Officer: means the first officer or senior manager above the respondent in the respondent's chain of command.

Office for the Coordination of Grievances and Appeals (OCGA): means the office of the RCMP that is responsible for administrative matters relating to grievances and appeals.

Representative: means a person authorized by a grievor or respondent, to act on behalf, and have the full authority, of a grievor or respondent during the grievance process.

Respondent: means the person who made the decision, act or omission that is the subject of a grievance, their replacement, or a person designated as the respondent by an adjudicator.

Instructions for: Grievance Presentation

OCGA Contact Information

Mailing Address:

Office for the Coordination of Grievances and Appeals
73 Leikin Drive
Building M5-1-118B
Mailstop 162
Ottawa, ON
K1A 0R2

E-mail Address:

RCMP.RecourseOCGA-RecoursBCGA.GRC@rcmp-grc.gc.ca

Fax Number:

613-825-7827



Grievance Presentation

Grievance File No.

Grievor

Surname		Given Name 1		Given Name 2		HRMIS Number	
Rank or Group and Level			Division or Directorate				
Preferred Language		Detachment or Sector or Unit					
<input type="radio"/> English <input type="radio"/> French							

Contact Information

Work Street Name and Street Number			Work City		Work Province		
Work Telephone (include area code)		Work E-mail Address					
Home Street Name and Street Number			Home City		Home Province		
Home Telephone (include area code)		Home E-mail Address					

Initial Level Grievance Presentation

Please select grievance type. (Decision, act or omission)

If you selected "Other" for grievance type, please specify the type.

Do you have a copy of the decision, act or omission?

Yes (Append the copy of the decision, act or omission to the form.)

No (Clearly identify the decision, act or omission.)

If you selected "No" for "Do you have a copy of the decision, act or omission?", clearly identify the decision, act or omission that you are grieving.

Is the decision, act or omission you are grieving inconsistent with a Treasury Board or RCMP policy / legislation? Yes No

Identify the Treasury Board or RCMP policy sections or legislation which is the basis of the decision, act or omission you are grieving.
 (Please provide the sections specific to your grievance and not the policy in its entirety.)

Describe how you have been aggrieved (negative effect or impact) as a result of this decision, act or omission.
 (This could include, but not limited to, financial or health related implications, loss of opportunity for promotion or developmental opportunities.)

Grievance Presentation

Protected A
once completed

Clearly specify the redress requested. (The redress / remedy you believe you are entitled to.)

Indicate the date on which you learned of the decision, act or omission (yyyy-mm-dd)
(This is the date on which you reasonably knew or should have known of the decision, act or omission aggrieving you.)

Respondent

Identify the person who made the decision, act or omission that is the subject of your grievance

Title	Surname	Given Name	Rank or Group and Level
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Line Officer

Identify the Respondent's Line Officer

Title	Surname	Given Name	Rank or Group and Level
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Initial Level Grievance Presentation Signatures

Grievor or Grievor's Representative

Signature from: Grievor Representative

Surname	Given Name 1	Given Name 2
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Signature Date (yyyy-mm-dd)

Telephone (include area code)	E-mail Address
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Grievor's Supervisor

Identify the Grievor's Supervisor, if presented directly to Grievor's Supervisor

Surname of the Grievor's Supervisor	Given Name 1	Given Name 2
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Signature Date (yyyy-mm-dd)

Initial Level OCGA Use Only

Method of presentation to OCGA is: <input type="checkbox"/> Mail <input type="checkbox"/> E-mail <input type="checkbox"/> Fax <input type="checkbox"/> By Hand <input type="checkbox"/> Courier	Date (yyyy-mm-dd)
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Surname of OCGA Employee	Given Name 1	Given Name 2
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Signature Date (yyyy-mm-dd)

Final Level Grievance Presentation

Specify the reasons for presenting the grievance to the final level (check all that apply). The initial level decision was: <input type="checkbox"/> reached in a manner that contravened the applicable principles of procedural fairness; <input type="checkbox"/> based on an error of law; <input type="checkbox"/> clearly unreasonable.	Date you were served with the initial level decision (yyyy-mm-dd)
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Grievance Presentation

Protected A
once completed

Provide a concise statement of how the initial level decision contravened the applicable reasons chosen above.

Clearly specify the redress requested.

Final Level Grievance Presentation Signatures

Grievor or Grievor's Representative

Signature from Grievor Representative

Surname	Given Name 1	Given Name 2	Date (yyyy-mm-dd)
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Telephone (include area code)	E-mail Address
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Signature Date (yyyy-mm-dd)

Grievor's Supervisor

Identify the Grievor's Supervisor, if presented directly to Grievor's Supervisor

Surname of Grievor's Supervisor	Given Name 1	Given Name 2	Date (yyyy-mm-dd)
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Signature Date (yyyy-mm-dd)

Final Level OCGA Use Only

Method of presentation to OCGA is <input type="checkbox"/> Mail <input type="checkbox"/> E-mail <input type="checkbox"/> Fax <input type="checkbox"/> By Hand <input type="checkbox"/> Courier	Date (yyyy-mm-dd)
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Surname of OCGA Employee	Given Name 1	Given Name 2
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Signature Date (yyyy-mm-dd)