

# CIVIL SERVICE

## BARGAINING PROPOSAL SUBMISSION FORM

Your Name \_\_\_\_\_ Component \_\_\_\_\_ Area \_\_\_\_\_ Local \_\_\_\_\_

Home Ph # \_\_\_\_\_ Meeting Date \_\_\_\_\_

Given that:

We propose:

Moved     Seconded     Carried

Is this proposal a request for a special wage adjustment ?    YES    NO

If yes, please provide the Presenter's Name \_\_\_\_\_ & Home Ph # \_\_\_\_\_

Staff Representative \_\_\_\_\_