



International
**LONGSHORE & WAREHOUSE
UNION**

LOCAL 500

M & G CHARGES FORM

DATE: _____

NAME: _____

WORK #: _____

DATE OF INCIDENT: _____ SHIFT: _____ LOCATION: _____

ACCUSED: _____

WORK #: _____

Please Check Appropriate Charge

<input type="checkbox"/> <i>Conduct Detrimental</i>	<input type="checkbox"/> <i>Violation of Despatch Rules</i>	<input type="checkbox"/> <i>Harassment</i>
<input type="checkbox"/> <i>Verbal Abuse of an Officer</i>	<input type="checkbox"/> <i>Violation of Safety rules</i>	<input type="checkbox"/> <i>Abandoning the job</i>
<input type="checkbox"/> <i>Verbal Harassment</i>	<input type="checkbox"/> <i>Violation of ILWU Canada Social Media Policy</i>	<input type="checkbox"/> <i>Assault</i>
<input type="checkbox"/> <i>Violating Union Policy by working more than 2496 hours in _____ Year</i>		
<input type="checkbox"/> <i>Other charges (please describe) _____</i>		

DESCRIBE INCIDENT:

M & G CHARGES FORM

Witnesses

1. Witness Name: _____ Work #: _____

2. Witness Name: _____ Work #: _____

3. Witness Name: _____ Work #: _____
