



**CWA Local 7270**

**Waiver of Representation**

Grievant's Name \_\_\_\_\_ Grievance # \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

By signing this waiver I am notifying the Union that I \_\_\_\_\_ do not wish to pursue this grievance through the Grievance and Arbitration process of my Collective Bargaining Agreement. My Desire to waive my rights in this grievance is done without prejudice or admission of any fault.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**-TO BE COMPLETED BY CWA 7270 STEWARD -**

I, (print name) \_\_\_\_\_, CWA 7270 union representative acknowledge that the above referenced grievant has refused representation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date