

Bump Form

Please print

Date (dd/mm/yy): _____

To Human Resource Department
Supervisor
USW, Local 5890

As a result of being displaced from my position of _____

I _____ wish to exercise my bumping rights in accordance
with article 12.10 (m) and 12.10 (n) of the CBA and bump into the position of:

_____ in the _____ Department,
which is presently being held by _____ who is junior to me
on the seniority list. I have the necessary qualifications to do this job.

Signature of Employee

Approved by: _____ Date: _____
Signature of General Foreman or Supervisor dd/mm/yy

Reasons if denied: _____

