

**UAW 1853 -SPRING HILL TEAM MEMBER**  
**Unpaid Vacation Payment Appeal Form**

Please print all info

Name: \_\_\_\_\_

Phone Numbers: Cell: \_\_\_\_\_ Home: \_\_\_\_\_

Email Address: \_\_\_\_\_

GMIN Number: \_\_\_\_\_

Building Working In Today: \_\_\_\_\_

Team working in today: \_\_\_\_\_ Crew: \_\_\_\_\_

GM Hire Date: \_\_\_\_\_

<b>Plant I was working in at time the UNPAID Vacation was paid out:</b>
Plant: _____
Shift: _____
Area working in: _____
Shift: _____
Were you forced or was it Voluntary move? _____
<b>If you were transferring between plants at the time:</b>
Plant you transferred from: _____
Date you left plant: _____
Did you take vacation or leave to transfer: _____
Plant you transferred to: _____
Date you actually reported to work / punched in: _____
Did you TURN DOWN any Plant offers / Moves (Yes or No): _____
To which Plant: _____
When turned down: _____
<b>Date you returned to work in Spring Hill as active Team member:</b>
Date: _____
Team / Crew: _____

Concerns / Issues / Add'l Info: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature

Date Submitted to Committeeman

**APPEAL FORM MUST BE SUBMITTED TO COMMITTEEMAN. They will turn into Chairmans Office.**

**SUPPORTING DOCUMENTATION MUST BE PROVIDED & ATTACHED TO THIS APPEAL FORM**

**IF NO DOCUMENTATION IS SUPPLIED BY TEAM MEMBERS, APPEAL REQUEST MAY NOT BE REVIEWED.**