



GRIEVANCE # _____

MIAMI-DADE COUNTY PUBLIC SCHOOLS

REQUEST FOR EXTENSION OF TIME

(Please Type or Print)

Request Made By:

- Grievant
- Bargaining Agent
- MDCPS

Status of Grievance:

- Step I
- Step II
- Step III
- Arbitration

Amount of Additional Time Requested _____

Reason for Request:

Date Received _____

Signature (*Party Making Request*) Date

Response to Request:

Distribution of Form:

1. Grievant
2. Bargaining Agent
3. Office of Labor Relations

Signature (*Party Making Response*) Date