Local Grievance # _____

Issue Statement (Block 15 of PS Form 8190):

Did management violate Article 7 of the National Agreement and the Full-Time Flexible (FTF) Memorandum of Understanding by failing to convert the senior PTF(s) to FTF status in a timely manner, and if so, what should the remedy be?

Union Facts and Contentions (Block 17 of PS form 8190)

Facts:

1. PTF Letter Carrier(s) **[name]** is/are the senior PTF Letter Carrier(s) in the **[Installation name]**.

2. The Union has provided TACS Employee Everything Reports for PTF Letter Carrier(s) **[name]** for the time period of **[date]** through **[date]**. The Union created a chart showing the hours worked on a daily basis by PTF Letter Carrier(s) **[name]**.

Contentions:

1. On p. 7-22 of the 2009 JCAM, the following language appears in the Full-Time Flexible Memorandum signed July 21, 1987:

   "Re: Maximization/Full-time Flexible - NALC

   Where a part-time flexible has performed letter carrier duties in an installation at least 40 hours a week (8 within 9, or 8 within 10, as applicable), 5 days a week, over a period of 6 months (excluding the duration of seasonal periods on seasonal routes, defined in Article 41, Section 3.R of the National Agreement), the senior part-time flexible shall be converted to full-time carrier status.

   This criteria shall be applied to postal installations with 125 or more man years of employment.

> *It is further understood that part-time flexibles converted to full-time under this criteria will have flexible reporting times, flexible nonscheduled days, and flexible reporting locations within the installation depending upon operational requirements as established on the preceding Wednesday.*
>
> *The parties will implement this in accordance with their past practice."*

2. Letter Carrier **[name]** has met the criteria outlined in the FTF MOU quoted above.

3. The following language appears on p. 7-24 of the 2009 JCAM concerning potential conversions to FTF:

    > *"By tracking of 39 hours rather than 40 hours each service week, the parties recognized that a conversion should be made if the PTF missed the 40 hours by only minutes on a day or days during the service week.*
    >
    > *In addition, local management may examine whether approved leave was used <u>solely</u> to reach the triggering level of hours worked during any of the service weeks during the six-month period."*

4. The above language states that management may examine whether approved leave was used <u>solely</u> to reach the triggering number of hours.

    The word <u>solely</u> is defined as follows:

    > **sole·ly** [sṓl lee]
    > *adv*
    >
    > **only:** for nothing other than

    This means that the leave would have had to have been used <u>for nothing other than</u> to trigger the number of hours needed to meet the criteria in the FTF MOU.

5. All leave used by PTF Letter Carrier(s) **[name]** was used for either recreational or personal reasons (AL) or incapacitation or undergoing

medical or dental treatment (SL). All annual leave and sick leave requests were approved in advance.

6. The Union has provided copies of the PS Forms 3971 used by Letter Carrier **[name]** to request annual and sick leave. The chart below was created by the Union to examine these annual/sick leave requests:

Leave Date	Number of Hours	Date Requested	Date Approved	Page where copy of 3971 appears in Case File

7. There was no leave taken during the six month period covered by this grievance that would cause an interruption of the six-month qualifying period under the *"Maximization/Full-time Flexible – NALC"* MOU.

8. Letter Carrier **[name]** should have been converted to FTF status no later than **[date]**. As a full time employee, Letter Carrier **[name]** should have been paid for all holidays thereafter.

Remedy (Block 19 of PS Form 8190):

1. The Senior PTF Letter Carrier in the **[Installation name]** be immediately converted to Full-Time Flexible status.

2. Letter Carrier **[name]** be given the opportunity to sign or decline to sign the Overtime Desired List for the current quarter upon conversion to FTF.

3. Letter Carrier **[name]** be paid a lump sum of 8 hours holiday pay for each holiday that occurred between the date the conversion to FTF should have been made and the date of actual conversion per this resolve, and/or any other remedy the Step B team or an Arbitrator deems appropriate.

National Association of Letter Carriers

Request for Information

To: _____ Date _____

  Supervisor Customer Services

_____

Station/Installation

Dear _____,

  Pursuant to Article 17 and 31 of the National Agreement, I am requesting the following information:

  1. Copies of TACS Employee Everything Reports for PTF Letter Carrier(s) _____ for the period _____ to _____.

  2. Copies of any and all PS Forms 3971 for all leave used by PTF Letter Carrier(s) _____ during the period _____ to _____.

  3. PS Form 3972 for the last two calendar years for PTF Letter Carrier(s) _____.

  4. Current Letter Carrier seniority roster for the _____ Installation.

I am also requesting time to interview the following individuals:

  1. Letter Carrier(s) _____.

  Your cooperation in this matter, will be greatly appreciated. If you have any questions concerning this request, or if I may be of assistance to you in some other way, please feel free to contact me.

Sincerely,

_____ Request received by: _____

Shop Steward
NALC Date: _____

National Association of Letter Carriers

Request for Steward Time

To: _____   Date: _____
   Supervisor Customer Services

_____
Station/Post Office

Dear _____,

       Pursuant to Article 17 of the National Agreement, I am requesting the following steward time to:
Investigate a Grievance ☐ Write & Prepare a Grievance ☐ Interview Witnesses ☐

I anticipate needing approximately _____ (hours) of steward time, which needs to be scheduled no later than _____. In the event more steward time is needed, I will inform you as soon as possible.

Individuals the union needs to interview:
_____   _____
_____   _____
_____   _____
_____   _____
_____   _____

       Your cooperation in this matter will be greatly appreciated. If you have any questions concerning this request, or if I may be of assistance to you in some other way, please feel free to contact me.

Sincerely,

_____   Request received by: _____
Shop Steward
NALC   Date: _____

PTF _____

WEEK	PP WK	SAT	MON	TUE	WED	THU	FRI	TOTAL
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
						AVERAGE:		