



PENNSYLVANIA STATE CORRECTIONS OFFICERS ASSOCIATION

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Patrolling the Toughest Blocks in the State
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To: _____

From: _____

Date Given
To Management: _____

Subject: Request For Information

PSCOA SI _____ is requesting the following information for the possible filing of, and/or the investigation of a grievance. A signature receipt is requested upon receiving this request from management.

Requested Information:

- 1.
- 2.
- 3.
- 4.
- 5.

Signature of Management _____ Date _____

Please return the above information within 7 working days of receiving this notice. This request will be placed in our grievance package.

