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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: | Click or tap here to enter text. | | | | | | | Date: | | | | Click or tap to enter a date. | | |
| Mailing Address: | | | | | Click or tap here to enter text. | | | Phone Number: | | | | | Click or tap here to enter text. | |
| School/Site: | | | | Choose a location. | | | | Position: | | | | | Click or tap here to enter text. | |
| Date of Oral Meeting: | | | | | | Click or tap to enter a date. |  | | | | | | | |
| What is the complaint? | | | | | | Click or tap here to enter text. | | | | | | | | |
| What was the outcome? | | | | | | Click or tap here to enter text. | | | | | | | | |
| Employee’s Response | | | | | | | | |  | | | | | |
|  | |  | | | I am satisfied with the answer to my grievance. | | | |  | | | | | |
|  | |  | | | I am not satisfied with the answer to my grievance. | | | |  | | | | | |
| Grievance Statement (Include witnesses, if any.) | | | | | | | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | | | | | | | |
| Relief Sought: | | | | | | | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | | | | | | | |
| Employee’s Signature: | | | | | |  | | | Date: | |  | | | |
|  | | | | | | | | | | | | | | |
| Level One: Decision of Immediate Supervisor: | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| Supervisor’s Signature: | | | | | |  | | | Date: | |  | | |  |
|  | | | | | |  | | |  | |  | | | |
| Employee’s Response | | | | | |  | | |  | |  | | | |
|  | | |  | | I am satisfied with the answer to my grievance. | | | | | |  | | | |
|  | | |  | | I am not satisfied with the answer to my grievance. | | | | | |  | | | |
| Employee’s Signature: | | | | | |  | | | | Date: |  | | | |

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| Level Two: Reply to Employee Grievance, Next Level of Management | | | | | | | | | |
| Decision of Supervisor/Superintendent | | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | | |
| Supervisor’s/Superintendent’s Signature | | | |  | | Date: | | Click or tap to enter a date. | |
| Employee’s Response | | | | | | | | | |
|  |  | I am satisfied with the answer to my grievance. | | | | | | | |
|  |  | I am not satisfied with the answer to my grievance. | | | | | | | |
| Employee’s Signature | | |  | | Date: | |  | |  |
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| Level Three: Reply to Employee’s Grievance, Next Level of Management | | | | |
| Decision of Superintendent: | | | | |
| Click or tap here to enter text. | | | | |
| Superintendent’s Signature: |  | Date: |  |  |
|  | | | | |