

GRIEVANCE FORM

Grievant _____

Building _____

Assignment _____

Date Filed _____

Date of Informal Meeting _____

Distribution of Form:

- 1. Unit Member
- 2. Association
- 3. Immediate Supervisor, Level I
- 4. Superintendent/Designee, Level II
- 5. Mediator, Level III
- 6. Arbitrator, Level IV

=====

CHECK ONE: Level One Two Three Four

Date of cause or knowledge of grievance _____

Statement of Grievance:

Relief Sought:

Signature of Grievant

Received by District: _____

Date Received
By _____

Disposition by District:

Signature of District Representative Date

Date Disposition Received by Grievant Signature of Grievant

(Note: If additional documents are needed, attach an additional sheet.) (Revised 5/84, 5/91)