

GRIEVANCE REPORT

1. Personal Information:

Name of Grievant:

Home Address:

Home Telephone Number:

Worksite:

Work Telephone Number:

Email address:

Preferred Method of Contacting Grievant:

2. Description of Grievance:

- a. Describe the grievance, including the date(s) of the act, omission or decision that is the subject of the grievance, and all pertinent facts supporting the grievance, including the names of any people who can provide information regarding the grievance.

b. Identify (and attach) any Board policy, procedure, or work rule that has been violated or misapplied, if any.

c. Identify supervisors, administrators, or other decisionmakers whose actions led to the filing of the grievance, and all witnesses or other persons having information that is relevant to the grievance.

d. Attach or include copies of documentary material or other evidence that is relevant to the grievance.

3. Description of Specific Relief (Corrective Action) Sought:

4. Description of Efforts Made to Resolve the Problem or Complaint (If No Such Effort Has Been Made to Date, Explain Why):

I affirm that to the best of my knowledge, the foregoing information is true, accurate, and complete.

(Signature of Employee)

Date: _____

FOR OFFICE USE ONLY

**Date Grievance Report filed with
Superintendent:** _____

Date Superintendent Response is
Due: _____

Received
by: _____