

GRIEVANCE FORM

This form is to be completed in the filing of a grievance under policy GBK and administrative rule GBK-R, Staff Concerns/Complaints/Grievances.

Full name _____
First *Middle* *Last*

Job assignment _____

Location (school or department) _____

Supervisor's name _____

Supervisor's position _____

Have you addressed your concern with your immediate supervisor? Yes _____ No _____

If no, please explain why. _____

If you feel your supervisor is not the person who should address your grievance, give the name and position of the person you feel should address your grievance. _____

State the action you believe was in error and what board policies and/or administrative procedures, rules and regulations you believe were violated, misapplied or misinterpreted. Use the back of this form, if necessary. _____

Date the action occurred. _____

State why you feel the action was in error. _____

State what you are asking to be done regarding the matter. _____

Signature _____ Date _____

Present this form to your principal or direct supervisor, even if you feel he/she was not responsible for the error. He/She will be responsible for passing it to the appropriate person as necessary.