STEP I GRIEVANCE FORM

Name _________________________________ Position/Title: __________________________

School/Program: ___________________________________________________________ SY ________

If known, indicate the specific contract provision(s) believed to have been violated, misapplied or misinterpreted: ________________________________________________________________

Describe how you believe the contract was violated, by providing a detailed account (attach extra sheets if necessary):
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

State the remedy or relief requested: ________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

This grievance pertains to the contract article(s) and other charges identified herein as well as any other relevant contract articles, policies, rules, and regulations.

Persons Present: _________________________________ ________________________________

I agree to provide the requested relief: _________
I disagree and will not provide the requested relief: _________
(Supervisor, please initial appropriate line)

___________________________________________________________

Signature of Grievant Signature of Supervisor

Date: ___________________________