

GRAMBLING STATE UNIVERSITY
Grambling, Louisiana

UNIVERSITY GRIEVANCE PROCEDURE FORM

The use of this form must comply with the time limits specified in the University Grievance Procedure Action Steps contained in the staff handbook.

INSTRUCTIONS: Complete all information requested on this form,. If more space is required, attach additional pages. After completing each step of the grievance procedure, a copy should be forwarded to the EEO Officer.

PART I - TO BE COMPLETED BY GRIEVANT/EMPLOYEE **DATE:** _____

EMPLOYEE NAME: _____ **SS#** _____

JOB TITLE: _____ **DEPT:** _____

GRIEVANCE STATEMENT

State the incident which occurred that led to this dissatisfaction. Describe the incident including dates, places, individuals involved, etc.: _____

State the reason(s) why you are dissatisfied: _____

State relief sought: _____

Grievant's Signature: _____

PART II - TO BE COMPLETED BY SUPERVISOR/ADMINISTRATOR AND EMPLOYEE

DECISION OF SUPERVISOR (DEPARTMENT HEAD OR DIRECTOR)

Supervisor's Signature: _____ Date: _____

Employee's Response: Place a check mark () in the appropriate box

- I am satisfied with the answer to my grievance.
- I am not satisfied with the answer to my grievance and will deliver this to the next level supervisor for next step.

DECISION OF THE DEAN OR ASSISTANT VICE PRESIDENT

Signature _____ Date _____

Employee's Response: Place a check mark () in the appropriate box

- I am satisfied with the answer to my grievance.
- I am not satisfied with the answer to my grievance and will deliver this to the next level supervisor for next step.

DECISION OF THE VICE PRESIDENT

Signature _____ Date _____

EEO/AA

PART II - DECISIONS (CONTINUED)

Employee's Response: Place a check mark () in the appropriate box.

[] I am satisfied with the answer to my grievance.

[] I am not satisfied with the answer to my grievance and will deliver this to the next level supervisor for next step.

DECISION OF THE PRESIDENT

Signature _____ Date _____