

LAW OFFICES OF THE PUBLIC DEFENDER
GRIEVANCE FORM

DATE: _____

EMPLOYEE: _____ CLASSIFICATION: _____

BUREAU DIV./SECTION: _____ TELEPHONE: _____

EMPLOYEE REPRESENTATIVE: _____

Grievance: A complaint by an employee concerning the interpretation or application of the provisions of a Memorandum of Understanding or of rules and regulation governing, personnel policies, working conditions, or other aspects of their employment in an informal manner between an employee and the immediate supervisor.

Nature of Grievance: _____

Cite Article of MOU, or Rule or Regulation violated: _____

Remedy desired: _____

Informal discussion held on _____ regarding the above matter between _____ and _____

(Employee's Signature)

(Immediate Supervisor's Signature)

STEP 1

Date Received: _____

Discussed on: _____

Summary of Facts: _____

Decision: _____

Date Returned to Employee _____

Signature: _____ Title: _____

2nd level appeal must be filed with _____

(Name and Title)

within _____ business days from receipt of decision.

STEP 2

Date Received: _____

Discussed on: _____

Summary of Facts: _____

Decision: _____

Date Returned to Employee _____

Signature: _____ Title: _____

3rd level appeal must be filed with _____

(Name and Title)

within _____ business days from receipt of decision.

STEP 3

Date Received: _____

Discussed on: _____

Summary of Facts: _____

Decision: _____

Date Returned to Employee _____

Signature: _____ Title: _____