

**GALLUP MCKINLEY COUNTY SCHOOLS**

**GRIEVANCE FORM**

The purpose of the grievance procedure shall be to secure, at the lowest possible administrative level, mutually satisfactory resolution to problems or complaints by an employee alleging a violation of the Collective Bargaining Agreement or District policy.

Name of Grievant: \_\_\_\_\_ Date Filed: \_\_\_\_\_

School/Work Site: \_\_\_\_\_ Position: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Petition is Filed Against: \_\_\_\_\_ Title: \_\_\_\_\_

Alleged Violation of Labor Contract or District Policy (Specific): \_\_\_\_\_

Date Grievance Was First Known to Exist: \_\_\_\_\_

**Statement of Grievance**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Relief Sought**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Acknowledgement of Receipt by Supervisor**

Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

**Level 1**

Disposition at Step 1, to be completed by Supervisor:

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Response from Supervisor will be attached to grievance form and forwarded to employee.

**Level 2**

**Acknowledgement of Receipt by Assistant Superintendent of Personnel or Designee**

Asst. Supt. Of Personnel: \_\_\_\_\_ Date: \_\_\_\_\_

Disposition at Step 2, to be completed by Assistant Superintendent of Personnel or Designee:

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Response from Assistant Superintendent of Personnel or Designee will be attached to grievance form and forwarded to employee.

**Level 3**

**Acknowledgement of Receipt by Superintendent**

Superintendent: \_\_\_\_\_ Date: \_\_\_\_\_

Disposition at Step 3, to be completed by Superintendent:

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Response from Superintendent will be attached to grievance form and forwarded to employee.