

MARYSVILLE JOINT UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM - INFORMAL

Submission of Complaint: Portions of this section should be completed by the grievant and supervisor.

EMPLOYEE NAME _____ WORK LOCATION _____

Statement of Grievant: Specific act or omission which is an alleged contract violation.

Date of the contract violation: _____

Specific article(s) of the collective bargaining agreement alleged to have been violated (cite source):

_____ Date _____ Signature

Upon completion of this section, Grievant shall present original and all copies to immediate supervisor.

Immediate Supervisor's Response: _____

_____ Date _____ Signature

Upon completion of this section, Assistant Superintendent shall present original to Grievant, and forward copies as follows:

- | | | | |
|----------|----------------------------|-----------|----------------------------|
| Original | – Return to Grievant | Pink | – Grievant's File (School) |
| Green | – Immediate Supervisor | Goldenrod | – MUTA President |
| Yellow | – Assistant Superintendent | | |