REQUEST FOR SETTLEMENT OF GRIEVANCE/CLASSIFIED LEVEL ONE

(To be completed by aggrieved person)

Date of Presentation to Super	visor	
Name of Aggrieved Person		
Home Address		
School	Subject Are	ea
Nature of Grievance:		
Settlement Requested:		
	Signed	
		Agarieved Person

Copy 1 - Supervisor, principal or other administrator

Copy 2 - Superintendent of Schools

Copy 3 - Aggrieved Person

REPLY TO LEVEL ONE GRIEVANCE/CLASSIFIED

Date Reply Sent to Aggrieved Person _	
Name of the Aggrieved Person	
School S	Subject Area
Date of Presentation of Grievance to Su	ipervisor
Reply of supervisor, principal or other a	dministrator with rationale:
Signed	
Signed	Supervisor, Principal or Other Administrator

Copy 1 - Supervisor, Principal or Other Administrator

Copy 2 - Superintendent of Schools

Copy 3 - Aggrieved Person

12/04

REQUEST FOR SETTLEMENT OF GRIEVANCE/CLASSIFIED LEVEL TWO

(Copies of be attache	•	t of Grievance, LEVEL ONE, and Reply	' mus	
Date of Pr	esentation to Superinte	endent		
Name of A	ggrieved Person _			
Home Add	ress			
School		Subject Area		
State reas	ons for submission of g	prievance to LEVEL TWO:		
				
Settlemen	t Requested:			
Signed _		Signed		
	Superintendent	Aggrieved Person		

Copy 1 - Supervisor, Principal or Other Administrator

Copy 2 - Superintendent of Schools

Copy 3- Aggrieved Person

REPLY TO LEVEL TWO GRIEVANCE/CLASSIFIED

(Copies of Request for Settlement of Grievance, LEVEL ONE, and reply must be submitted.) Date of Reply of Superintendent Sent to Aggrieved Person _____ Name of the Aggrieved Person Home Address_____ School _____ Subject Area _____ Date of Submission of Grievance to Superintendent Decision of Superintendent:

Signed _____

Superintendent or Designee

Copy 1 - Supervisor, Principal or Other Administrator

Copy 2 - Superintendent of Schools

Copy 3 - Aggrieved Person

REQUEST FOR SETTLEMENT OF GRIEVANCE/CLASSIFIED LEVEL THREE

(Copies of all previous Requests for Settlement and Replies must be attached.)

Date of Submission to the Clerk of Board				
Name of the Aggrieved Person				
Home Address				
School Subject Area				
State reasons for submission of grievance to LEVEL THREE:				
Recommendation of the Board:				
Signed				

- Copy 1 Supervisor, Principal or Other Administrator
- Copy 2 Superintendent of Schools
- Copy 3 Aggrieved Person
- Copy 4 Clerk of Board of Education
- Copy 5 President of Board of Education

REPLY TO LEVEL THREE GRIEVANCE/CLASSIFIED

Date of Submission to the Clerk of Board				
Name of the Aggrieved Person				
Home Address				
School Sul	oject Area			
Date of LEVEL THREE hearing or investiga	ation			
Final decision of the Board of Education:				
Signed				
	President of Board of Education			

- Copy 1 Supervisor, Principal or Other Administrator
- Copy 2 Superintendent of Schools
- Copy 3 Aggrieved Person
- Copy 4 Clerk of Board of Education
- Copy 5 President of Board of Education 12/04