



NSCS Employee Grievance Form

The information on this form is confidential. Please refer to Policy 403 for a complete outline of the grievance process. This form is to be used in all grievances and completed as such. Working copies and final copies of the form will be filed in the Grievance Issues file that is separate from Personnel Files and is locked in the Director's office. Documents will be kept for 2 years.

If you are a third party who has been asked to attend related meetings, you should not have copies of any forms and must keep all information and conversations confidential.

-A supervisor (that is not the Director) needs to inform the Director upon receiving a Grievance Form.

Name:

Date:

Date of issue/incident:

Person with whom you'd like to resolve an issue:

State the issue:

State how you have tried to resolve/actions taken:

Signature:

Supervisor Name:

Supervisor comments:

Investigation summary:

Actions to take:

Supervisor Signature:

Date:

Return a copy of this document to the persons listed above. Establish a follow-up meeting date to discuss if the issue was resolved (if needed).

Follow-up meeting date _____

Resolution Summary:

Signature:

Supervisor Signature:

Date:

Part 2 if needed

Director's Name:

Meet with the 2 parties separately to clarify the issue.

Director comments regarding the conversations:

Investigation summary:

Actions to take:

Director Signature:

Date:

Return a copy of this document to the persons listed above. Establish a follow-up meeting date to discuss if the issue was resolved (if needed).

Follow-up meeting date_____

Resolution Summary:

Signature(s):

Director Signature:

Date:

Part 3 if needed

Board Chair or Designee Name:

Meet with the 2 parties separately to clarify the issue.

Board member comments regarding the conversations:

Investigation summary:

Actions to take:

Board Member Signature:

Return a copy of this document to the persons listed above. Establish a follow-up meeting date to discuss if the issue was resolved (if needed).

Follow-up meeting date_____

Resolution Summary:

Signature(s):

Board Member Signature:

Date:

*Once the final actions, meetings, and summaries are completed, this form must be given to the NSCS Director or Board Chair for filing in the Grievance File in the NSCS Director Office. The form is retained for 2 years.