



GRIEVANCE FORM / PETITION FOR HEARING

1. Complainant's Name: _____
2. Employing Department / Unit: _____ Job Title: _____
3. Home Address: _____
4. Phone Number: _____ Email: _____
5. Explain the nature of the problem or complaint. (Conduct or action where grievance originated and date of occurrence.)

6. What communication has taken place between you and your supervisor(s) concerning the grievance?

7. What supervisor(s) are responsible for your grievance?

8. Why do you disagree with the response/action of your supervisor(s)?

9. What is your suggestion for the proper resolution of the grievance?

UNIVERSITY of NORTH GEORGIA
GRIEVANCE FROM / PETITION FOR HEARING