

NEW HAVEN UNIFIED SCHOOL DISTRICT

CERTIFICATED GRIEVANCE FORM – LEVEL 1
SUBMISSION OF GRIEVANCE

ALL PORTIONS OF THIS SECTION MUST BE COMPLETE BY THE GRIEVANT

Employee Name _____ Work Location _____

Statement of Grievance _____	

Date of Alleged Grievance _____	Date of Informal Conference _____
Specific contract provision alleged to have been violated (cite source): _____	

Remedy Sought _____	

Date _____	Signature _____

UPON COMPLETION OF THIS SECTION, GRIEVANT SHALL PRESENT ORIGINAL AND COPIES 1, 2, AND 3 TO IMMEDIATE SUPERVISOR. COPY 4 SHOULD BE RETAINED BY GRIEVANT.

Immediate Supervisor's Response _____

Date _____ Signature _____

UPON COMPLETION OF THIS SECTION, IMMEDIATE SUPERVISOR SHALL RETAIN ORIGINAL; FORWARD COPY 1 TO GRIEVANT; COPY 2 TO SUPERINTENDENT; AND COPY 3 TO EXCLUSIVE REPRESENTATIVE.

DISTRIBUTION:

ORIGINAL: Immediate Supervisor
COPY 1: Immediate Supervisor-Return to Grievant

COPY 2: Superintendent/Designee
COPY 3: Exclusive Representative
COPY 4: Grievant

NEW HAVEN UNIFIED SCHOOL DISTRICT

CERTIFICATED GRIEVANCE FORM – LEVEL II
APPEAL TO SUPERINTENDENT/DESIGNEE

ALL PORTIONS OF THIS SECTION MUST BE COMPLETE BY THE GRIEVANT
COPY 1 OF COMPLETED GRIEVANCE FORM LEVEL 1 MUST BE ATTACHED

Reason for Appeal _____	

Date _____	Signature _____

UPON COMPLETION OF THIS SECTION, GRIEVANT SHALL PRESENT ORIGINAL AND COPIES 1, 2, AND 3 TO THE SUPERINTENDENT/DESIGNEE. COPY 4 SHOULD BE RETAINED BY GRIEVANT.

Superintendent/Designee Response _____

Date _____ Signature _____

UPON COMPLETION OF THIS SECTION, SUPERINTENDENT/DESIGNEE SHALL RETAIN ORIGINAL; FORWARD BOTH COPIES 1 OF COMPLETED GRIEVANCE FORMS LEVEL I AND II TO GRIEVANT; COPY 2 TO GRIEVANT’S IMMEDIATE SUPERVISOR; AND COPY 3 TO EXCLUSIVE REPRESENTATIVE.

- DISTRIBUTION:**
- | | |
|--|---|
| ORIGINAL: Immediate Supervisor | COPY 2: Superintendent/Designee |
| COPY 1: Immediate Supervisor-Return to Grievant | COPY 3: Exclusive Representative |
| | COPY4: Grievant |

**CERTIFICATED GRIEVANCE FORM – LEVEL III
REQUEST FOR ARBITRATION**

**THIS SECTION MUST BE COMPLETED BY THE GRIEVANT
COPY 1 OF COMPLETED GRIEVANCE FORMS LEVEL I AND II MUST BE ATTACHED**

I hereby request Arbitration to consider the grievance outlined on the attachments.	
Date _____	Signature _____

UPON COMPLETION OF THIS SECTION, GRIEVANT SHALL PRESENT ORIGINAL COPIES 1 AND 2 AND ALL ATTACHMENTS TO THE EXCLUSIVE REPRESENTATIVE. COPY 3 SHOULD BE RETAINED BY GRIEVANT.

SUBMISSION TO ARBITRATION

**SIGNED COPIES OF THE REPORT SHALL BE ATTACHED
COPY 1 SHALL BE PRESENTED TO THE SUPERINTENDENT/DESIGNEE**

	Date of Board of Directors action
	Date notice sent to Superintendent/Designee
	Date of submission to arbitration
Signature _____	

	Date of arbitrator's award (attached)
	Date of Board of Education action

UPON COMPLETION OF THIS SECTION, THE EXCLUSIVE REPRESENTATIVE SHALL PRESENT THE GRIEVANT WITH A REPORT OF THIS AWARD. COPY 2 SHOULD BE RETAINED BY EXCLUSIVE REPRESENTATIVE.

DISTRIBUTION:

ORIGINAL: Immediate Supervisor

COPY 1: Immediate Supervisor-Return to Grievant

COPY 2: Superintendent/Designee

COPY 3: Exclusive Representative

COPY 4: Grievant