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This complaint is filed based on my honest belief that \_\_\_\_\_ has engaged in conduct involving one or more of the following (mark all that apply):

**Harassment** based on my sex (including gender identity, sexual orientation, and pregnancy, childbirth, or any related medical conditions)

**Retaliation** based on:

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Suggested resolution/desired outcome: \_\_\_\_\_

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I agree that all of the information on this form is accurate and true to the best of my knowledge.

Complainant signature: \_\_\_\_\_ Date \_\_\_\_\_

Received by: \_\_\_\_\_ Date \_\_\_\_\_

Spartanburg School District Four  
Grievance Form for Professional Staff

FILE: GBK-E

Grievant Name: \_\_\_\_\_ Date Filed: \_\_\_\_\_

School/Department: \_\_\_\_\_ Job Title: \_\_\_\_\_

Describe the specific grounds under the grievance policy and regulations for your grievance. Include specific remedy sought.

Date of Event Giving Rise to Grievance: \_\_\_\_\_

Grievant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date Received by Immediate Supervisor: \_\_\_\_\_

Response to Grievance:

Grievant checks one: \_\_\_\_\_ Resolved \_\_\_\_\_ Unresolved

Grievant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby appeal this grievance to the Superintendent of Spartanburg School District Four, based on the following unacceptable conditions of the resolution.

Grievant Signature: \_\_\_\_\_ Date: \_\_\_\_\_