Affirmative Action - Grievance Report - FORM A

Step #1

FROM:_____, Grievant

TO:_____, Affirmative Action Officer

DESCRIPTION OF INCIDENT (include date(s)):

_____ _____

(Signature) (Date)

(This Portion to be used by Affirmative Action Officer ONLY)

Step #2

Grievance Number_____

TO:_____, Grievant

FROM:_____, Affirmative Action Officer

DATE GRIEVANCE RECEIVED:_____

RESPONSE TO GRIEVANT:

_____ _____

(Affirmative Action Officer Signature) (Date)