



# OXNARD SCHOOL DISTRICT

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## OXNARD SUPPORTIVE SERVICES ASSOCIATION (OSSA)

### LEVEL 3: SUPERINTENDENT'S GRIEVANCE RESPONSE

1. NAME OF GRIEVANT \_\_\_\_\_

2. DATE GRIEVANCE FILED \_\_\_\_\_

3. STATEMENT OF GRIEVANCE (Include contract provision[s] allegedly violated).

GRIEVANT ALLEGES: \_\_\_\_\_

\_\_\_\_\_

4. GRIEVANCE DENIED  (Summarize reasons) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. GRIEVANCE SUSTAINED  \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. IF GRIEVANCE SUSTAINED, STATE REMEDY \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. WAS THERE A PERSONAL CONFERENCE? YES  DATE \_\_\_\_\_

PERSONS PRESENT: \_\_\_\_\_

IF NO, INDICATE REASON \_\_\_\_\_

\_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Distribution:  Assistant Superintendent, HR  Grievant  Supervisor/District Administrator  OSSA President