



COMPLAINTS and GRIEVANCES – LEVEL TWO

To appeal a Level One decision, or the lack of a timely response after a Level One conference, please fill out this form completely and submit it by hand delivery, electronic communication, fax, or U.S. mail to the Superintendent or designee within the time established in DGBA(LOCAL). Appeals will be heard in accordance with DGBA(LEGAL) and (LOCAL) or any exceptions outlined therein.

1. Name: _____

2. Address: _____

Telephone Number: (____) _____ Email: _____

3. Position/Campus: _____

4. If you will be represented in voicing your complaint, please identify the person representing you.

Name: _____

Address: _____

Telephone Number: (____) _____ Email: _____

5. To whom did you present your complaint at Level One? _____

Date of conference: _____

Date you received a response to the Level One conference: _____

6. Please explain specifically how you disagree with the outcome at Level One.

7. Attach a copy of your original complaint and any documentation submitted at Level One.

8. Attach a copy of the Level One response being appealed, if applicable.

Employee Signature: _____

Signature of Employee's Representative: _____

Date of filing: _____

Complainant, please note:

A complaint form that is incomplete in any material way may be dismissed, but may be refiled with all the required information if the refile is within the designated time for filing a complaint.

Please keep a copy of the completed form and any supporting documentation for your records.