## Flagler Schools Human Resources Department Official Grievance Form

In accordance with the collective bargaining agreements between the unions and Flagler Schools, an employee who alleges a contract violation has the right to complete and submit this form to their principal or immediate supervisor, as appropriate, to formally initiate the grievance procedure and seek resolution.

Employee Name(s):				
Job Title(s):			Association Name:	
Worksite:			Work Phone:	
Level I				
			Alleged violation occur	rred of the following Article(s) and
				ation and the District School
· · · · · · · · · · · · · · · · · · ·		_		ction(s):
Meeting Requested:	YES	NO		
<u> </u>			OR	
Date Grievance Occurred:			Alleged violation occur	rred of the following Article(s) and
section(s) of the Agreemen	nt between th	ne Flagler E		nnel Association and the District
				, Section(s):
Meeting Requested:				
Witness(es) if any				
Specific relief sought: (att				
Signature:			Date:	
		APPI	EAL SECTION	
LEVEL II APPEAL: I her	eby notify th			I am appealing to Level II.
Reason: (attach sheets if n	eeded)	F		
Signature:			Date:	
LEVEL III APPEAL: I he	reby notify tl	he Superinte	ndent I am appealing the l	Level II decision to Level III.
Reason: (attach sheets if n			11 0	
Signature:			Date:	
TEVELIVADDE AL LI	1 1	2.4101	D11 1'1	. T
				e Level III decision to Level IV.
Reason: (attach sheets if n	eedea)		Date:	
Signature:			Date:	