

Cedar Hill

CARES

Communicating

And

Resolving

Every

Situation

Level III Employee Complaint Grievance Appeal Notice

To file an appeal of a Level I decision in accordance with Board Policy DGBA (LOCAL), please complete this form in its entirety and submit it via email to Grievances@chisd.net, in person, or by standard mail to:

Human Resources Department at 285 Uptown Blvd., Building 300, Cedar Hill, TX 75104.

All formal complaints and grievances will be processed in accordance with DGBA (LEGAL and LOCAL).

Date of Filing: _____

Employee Name: _____

Position: _____

Campus/ Department: _____

Direct Supervisor Name: _____

Phone Number: _____ Email Address: _____

1. Date of Level II Hearing: _____

2. Level II Hearing Officer: _____

3. Date of the Level II written response/decision letter: _____

4. Explain specifically why you disagree or are not satisfied with the outcome of the Level I Conference.

5. Do you request the CHISD Board of Education to hear your appeal in Open Session? **Yes or No** If yes, the Board will consider your request, however you may not have a legal right under the Texas Open Meetings Act to require a meeting in Open Session.

6. Attach a copy of the following:

1. The Level I Complaint/Grievance and submitted documentation
2. The Level I Response/ Decision
3. The Level II Complaint/Grievance and submitted documentation
4. The Level II Response/Decision

Employee Signature: _____