

# GRIEVANCE FORM

(For use with Collective Bargaining Agreement between the Board and the  
Collinsville Education Association, IEA-NEA)

\_\_\_\_\_  
**Grievant**

\_\_\_\_\_  
**Work Location and/or Assignment**

**DESCRIPTION OF GRIEVANCE:**

**DATE OF OCCURRENCE:**

**ARTICLES AND/OR POLICIES IN QUESTION:**

**REMEDY REQUESTED:**

**DATE:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Grievant**

(If additional sheets need to be attached to this Grievance Form to provide additional space for description, remedies, explanations, responses, position statement, etc., please make reference to any attachments in the appropriate place on this Grievance form.)

**(STEP 1)** Grievance Received by \_\_\_\_\_ on \_\_\_\_\_ (date)

Principal or Immediately Involved Supervisor's Response:

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Principal or Immediately Involved Supervisor's Signature**

Position of Grievant:

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Grievant's Signature**

**(STEP 2)** Grievance Received by \_\_\_\_\_ on \_\_\_\_\_ (date)

Superintendent's Response:

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Superintendent's Signature**

Position of Grievant:

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Grievant's Signature**

**(STEP 3)** Grievance Received by \_\_\_\_\_ on \_\_\_\_\_ (date)

Board of Education's Response:

\_\_\_\_\_ **Date**

\_\_\_\_\_ **Board of Education Representative's Signature**

Position of Grievant:

\_\_\_\_\_ **Date**

\_\_\_\_\_ **Grievant's Signature**

**(STEP 4)**

Name of Mediator:

Disposition of Grievance:

\_\_\_\_\_ **Date of Disposition**

\_\_\_\_\_ **Mediator's Signature**

**(STEP 5)**

Name of Arbitrator:

Arbitrator's Decisions:

\_\_\_\_\_ **Date of Decision**

\_\_\_\_\_ **Arbitrator's Signature**