APPENDIX

MIDFIELD CITY SCHOOLS GRIEVANCE REPORT

Personal Information:

Name of Grievant:				
Home Address:				
Home Telephone Number:				
Worl	ksite:	MES	RMS	MHS
Work Telephone Number:				
			ontacting Griev	
	I	Description (of Grievance:	
Describe the grievance, inclugrievance, and all pertinent f	_			cision that is the subject of the
Identify (and attach) any Boa misapplied:	ard poli	cy, procedur	e, or work rule	that has been violated or

Identify supervisors, administrators, or other decision makers who the grievance, and all witnesses or other persons having information grievance:	
Attach or include copies of documentary material or other evidence grievance:	e that is relevant to the
Description of Specific Relief (Corrective Action) Sought:	

Description of efforts made to resolve the problem or complaint (if no su	ch effort has been made
to date, explain why):	
I affirm that to the best of my knowledge, the foregoing information is tr complete.	ue, accurate, and
Signature of Employee/Grievant	Date