



Merit Supervisory and Confidential (S&C) Employee Grievance Form

This form identifies steps to follow for the UNI S&C grievance process. Additional information regarding this procedure may be found in the Regents Merit System Rules under 681-3.129 (19A) Grievances located at http://www.legis.state.ia.us/Rules/2002/iac/681/6813/6813.pdf. The Director of Human Resources may also be contacted to informally discuss an issue prior to beginning the formal grievance process.

Name of Staff Member (Grievant): _____ Position Title: _____

Name of Immediate Supervisor: _____ Department: _____

Statement of Grievance:

Statement citing grievance issue, including the Regents Merit rule involved (if known), and the date of the incident.

An addendum may be attached:

Adjustment sought/corrective action requested:

See Document Number(s): _____

Signature of Staff Member (Grievant): _____ UID: _____ Date: _____

Step 1: (Filed within 10 workdays of occurrence.)

Employee's Statement: _____

Supervisor's Reply/Proposed Disposition (Returned within 5 workdays of grievance.):

See Document Number(s): _____

Step 1: Answer Received (Date): _____ Accepted (Initial): _____ Rejected (Initial): _____

Agreement Reached at 1st Level:

Signature of Employee: _____

Signature of Supervisor: _____

Step 2: (Filed within 5 workdays of receipt of Step 1 decision.)

Date Received by Department Head: _____

Employee's Statement: _____

Disposition of Grievance by Department Head (Return within 10 workdays of receiving.): _____

See Document Number(s): _____

Signature of Department Head: _____ Date Returned to Grievant: _____

Step 2: Answer Received (Date): _____ Accepted (Initial): _____ Rejected (Initial): _____

Step 3: (Filed within 5 workdays of receipt of Step I decision.)

Date Received by College Dean or Division Vice President: _____

Employee's Statement: _____

Disposition of Grievance by College Dean or Division Vice President (Prepared with the assistance of the HR Director and returned within 10 workdays of receipt.): _____

See Document Number(s): _____

Step 3: Answer Received (Date): _____ **Accepted (Initial):** _____ **Rejected (Initial):** _____

Step 4: (Filed within 5 workdays of receipt of Step III decision.)

Date Received by President (or designee): _____

Employee's Statement With Additional Information Submitted for Appeal: _____

Signature: _____ **Date:** _____

Authorized Representative for Step IV Proceedings: _____

Disposition of Grievance by President of the University or Designee (Returned within 10 workdays of receipt of appeal.) _____

See Document Number(s): _____

Signature of President or Designee: _____ **Date Returned to Grievant:** _____

Step 4: Answer Received (Date): _____ **Accepted (Initial):** _____ **Rejected (Initial):** _____

Step 5: Arbitration (Filed within 5 workdays of receipt of Step 4 decision.)

I received a decision of my grievance dated _____. I am not satisfied with the decision and request a hearing before an Arbitrator for the following reason (Please state fully.): _____

Grievant's Signature: _____ **Date:** _____

(Mail to Merit System Director to arrange for hearing.)

Date Received by Board of Regents Office: _____

Final Disposition or Approval of Settlement of this Grievance:

Signature of Board of Regents Office Representative: _____ **Date:** _____

Date of Grievant Advised of Action Taken by the Board of Regents Office: _____

Signature of Grievant: _____ **Date:** _____

Merit Supervisory & Confidential (S&C) Employee Grievance Process

