**ALHAMBRA UNIFIED SCHOOL DISTRICT**

**GRIEVANCE FORM – LEVEL 1**

**SUBMISSION OF GRIEVANCE – All portions of this section must be completed by the Grievant.**

**(This Grievance is filed in accordance with the provisions of Article VII of the Contract.)**

| Unit Member’s Name:       | Work Location:       |
| --- | --- |
| Assignment:       |  |

1. A clear concise statement of the Grievance (an attachment is permissible):

|       |
| --- |

1. Date of alleged violation:

1. Specific Agreement provision alleged to be violated:

|       |
| --- |

1. Specific remedy sought:

|       |
| --- |

| **Signature of Grievant:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Date Filed****:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Signature of Immediate Supervisor:****Date Filed****:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| --- | --- |

**Upon completion of this section, the Immediate Supervisor shall: 1) retain a copy, 2) give a copy to the grievant, 3) send a copy to the ATA Office:** **ataoffice3030@gmail.com** **(626.289.1933)**

|  |
| --- |

Immediate Supervisor’s Response (an attachment is permissible):

|       |
| --- |

|

| **Signature of Immediate Supervisor:****Date Filed:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  | **Signature of Grievant:****Receipt of Response Date:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| --- | --- |

 |  |
| --- | --- | --- | --- |

**Upon completion of this section, the Immediate Supervisor shall: 1) retain original, 2) give a copy to the Grievant, 3) send a copy to the ATA office:** **ataoffice3030@gmail.com** **(626.289.1933)**

Revised: May 5, 2014