

MANHATTAN BEACH UNIFIED SCHOOL DISTRICT
GRIEVANCE LEVEL _____

1. Name of Grievant: _____
2. Work Location: _____
3. Job Title: _____
4. Immediate Supervisor: _____
5. Date Alleged Grievance Occurred: _____
6. Statement of Grievance (please summarize actions complained of; include location of act and any witnesses) _____

7. List specific contract provision(s) allegedly violated. Misinterpreted or misapplied. _____

8. Remedy Requested _____

9. Date of Informal Conference _____
10. Decision from Informal Conference _____

11. Grievance Representative (if any) _____

Grievant's Signature: _____