

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM: G-1 (Certificated)

GRIEVANCE LEVEL I
(TO BE FILLED OUT IN TRIPLICATE)

ORIGINAL TO: SUPERVISOR-PRINCIPAL
COPY TO: ASSISTANT SUPERINTENDENT FOR PERSONNEL

- 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) 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 APPLICABLE) _____

GRIEVANT'S SIGNATURE: _____

DATE GRIEVANCE FILED: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM:

G-2 (Certificated)

LEVEL I PROPOSED RESOLUTION
(TO BE FILLED OUT IN QUADRUPLICATE)

ORIGINAL TO: GRIEVANT
COPY TO: ASSISTANT SUPERINTENDENT FOR PERSONNEL
PVFA

1) NAME OF GRIEVANT _____

2) DATE GRIEVANCE FILED _____

3) STATEMENT OF GRIEVANCE (INCLUDE CONTRACT PROVISIONS ALLEGEDLY VIOLATED)
GRIEVANT ALLEGES: _____

4) GRIEVANCE DENIED (BRIEFLY STATE REASONS) _____

5) GRIEVANCE SUSTAINED

6) IF GRIEVANCE SUSTAINED - STATE REMEDY _____

7) WAS THERE A PERSONAL CONFERENCE? YES____ NO____
(IF "YES", PLEASE IDENTIFY DATE, LOCATION AND PERSONS PRESENT)

SIGNATURE: _____

DATE: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM:

G-3 (Certificated)

LEVEL I -PVFA RESPONSE
(TO BE FILLED OUT IN TRIPLICATE)

ORIGINAL TO: SUPERVISOR-PRINCIPAL

COPY TO: GRIEVANT

- 1) NAME OF GRIEVANT _____
- 2) DATE OF LEVEL I PROPOSED RESOLUTION _____
- 3) PVFA AGREES (DISAGREES) WITH PROPOSED RESOLUTION _____
- 4) REASONS FOR DISAGREEMENT _____

- 5) REMEDY REQUESTED _____

- 6) GRIEVANCE REPRESENTATIVE (IF APPLICABLE) _____

SIGNATURE: _____

DATE: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM:

G-4 (Certificated)

STEP I DECISION
(TO BE FILLED OUT IN QUADRUPPLICATE)

ORIGINAL TO: GRIEVANT
COPY TO: ASSISTANT SUPERINTENDENT FOR PERSONNEL
PVFA

- 1) NAME OF GRIEVANT _____
- 2) DATE GRIEVANCE FILED _____
- 3) STATEMENT OF GRIEVANCE (INCLUDE CONTRACT PROVISIONS ALLEGEDLY VIOLATED)
GRIEVANT ALLEGES: _____

- 4) GRIEVANCE DENIED (BRIEFLY STATE REASONS) _____

- 5) GRIEVANCE SUSTAINED
- 6) IF GRIEVANCE SUSTAINED -STATE REMEDY _____

- 7) WAS THERE A PERSONAL CONFERENCE? YES___ NO___
(IF "YES" , PLEASE IDENTIFY DATE, LOCATION AND PERSONS PRESENT)

SIGNATURE: _____ DATE: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM: G-5 (Certificated)

STEP II -APPEAL
(TO BE FILLED OUT IN TRIPLICATE)

ORIGINAL TO: ASSISTANT SUPERINTENDENT FOR PERSONNEL
COPY TO: GRIEVANT

- 1) NAME OF GRIEVANT _____
- 2) DATE OF LEVEL I DECISION _____
- 3) REASONS FOR APPEAL _____

- 4) REMEDY REQUESTED _____

- 5) GRIEVANCE REPRESENTATIVE (IF APPLICABLE) _____

SIGNATURE: _____ DATE: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM:

G-6 (Certificated)

STEP II -PROPOSED RESOLUTION
(TO BE FILLED OUT IN TRIPLICATE)

ORIGINAL TO: GRIEVANT
COPY TO: PVFA

- 1) NAME OF GRIEVANT _____
- 2) DATE APPEAL RECEIVED _____
- 3) STATEMENT OF GRIEVANCE -GRIEVANT ALLEGES _____

- 4) GRIEVANCE DENIED (BRIEFLY STATE REASONS) _____

- 5) GRIEVANCE SUSTAINED
- 6) IF GRIEVANCE SUSTAINED, STATE REMEDY _____

SIGNATURE: _____ DATE: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM:

G-7 (Certificated)

LEVEL II -PVFA RESPONSE
(TO BE FILLED OUT IN TRIPLICATE)

ORIGINAL TO: ASSISTANT SUPERINTENDENT FOR PERSONNEL
COPY TO: GRIEVANT

- 1) NAME OF GRIEVANT _____
- 2) DATE OF LEVEL I PROPOSED RESOLUTION _____
- 3) PVFA AGREES (DISAGREES) WITH PROPOSED RESOLUTION _____

- 4) REASONS FOR DISAGREEMENT _____

- 5) REMEDY REQUESTED _____

- 6) GRIEVANCE REPRESENTATIVE (IF APPLICABLE) _____

SIGNATURE: _____ DATE: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM:

G-8 (Certificated)

LEVEL II DECISION
(TO BE FILLED OUT IN TRIPLICATE)

ORIGINAL TO: GRIEVANT

COPY TO: PVFA

1) NAME OF GRIEVANT _____

2) DATE GRIEVANCE FILED _____

3) STATEMENT OF GRIEVANCE (INCLUDE COOTRACT PROVISIONS ALLEGEDLY VIOLATED)
GRIEVANT ALLEGES : _____

4) GRIEVANCE DENIED (BRIEFLY STATE REASONS) _____

5) GRIEVANCE SUSTAINED

6) IF GRIEVANCE SUSTAINED -STATE REMEDY _____

7) WAS THERE A PERSONAL CONFERENCE? YES ___ NO ___
(IF "YES" , PLEASE IDENTIFY DATE, LOCATIONAND PERSONS PRESENT)

SIGNATURE: _____

DATE: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM:

G-9 (Certificated)

LEVEL III DECISION
(TO BE FILLED OUT IN TRIPLICATE)

ORIGINAL TO: GRIEVANT
COPY TO: PVFA

1) NAME OF GRIEVANT _____

2) DATE GRIEVANCE FILED _____

3) STATEMENT OF GRIEVANCE (INCLUDE CONTRACT PROVISIONS ALLEGEDLY VIOLATED)
GRIEVANT ALLEGES: _____

4) GRIEVANCE DENIED (BRIEFLY STATE REASONS) _____

5) GRIEVANCE SUSTAINED

6) IF GRIEVANCE SUSTAINED -STATE REMEDY _____

7) WAS THERE A PERSONAL CONFERENCE? YES ___ NO ___
(IF "YES", PLEASE IDENTIFY DATE, LOCATION AND PERSONS PRESENT)

SIGNATURE: _____

DATE: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM:

G-10 (Certificated)

LEVEL III -PROPOSED RESOLUTION
(TO BE FILLED OUT IN TRIPLICATE)

ORIGINAL TO: GRIEVANT
COPY TO: PVFA

1) NAME OF GRIEVANT _____

2) DATE GRIEVANCE FILED _____

3) STATDIENT OF GRIEVANCE (INCLUDE CONTRACT PROVISIONS ALLEGEDLY VIOLATED)
GRIEVANT ALLEGES: _____

4) GRIEVANCE DENIED (BRIEFLY STATE REASONS) _____

5) GRIEVANCE SUSTAINED

6) IF GRIEVANCE SUSTAINED -STATE REMEDY _____

7) WAS THERE A PERSONAL CONFERENCE? YES___ NO___
(IF "YES", PLEASE IDENTIFY DATE, LOCATION AND PERSONS PRESENT)

SIGNATURE: _____ DATE: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM:

G-11 (Certificated)

LEVEL III -PVFA RESPONSE
(TO BE FILLED OUT IN TRIPLICATE)

ORIGINAL TO: UPERINTENDENT
COPY TO: RIEVANT

- 1) NAME OF GRIEVANT _____
- 2) DATE OF LEVEL III PROPOSED RESOLUTION _____
- 3) PFA AGREES (DISAGREES) WITH PROPOSED RESOLUTION _____

- 5) REMEDY REQUESTED _____

- 6) GRIEVANCE REPRESENTATIVE (IF APPLICABLE) _____

SIGNATURE: _____ DATE: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM:

G-12 (Certificated)

LEVEL III DECISION
(TO BE FILLED OUT IN TRIPLICATE)

ORIGINAL TO: GRIEVANT
COPY TO: PVFA

- 1) NAME OF GRIEVANT _____
- 2) DATE GRIEVANCE FILED _____
- 3) STATEMENT OF GRIEVANCE (INCLUDE COOTRACT PROVISIONS ALLEGEDLY VIOLATED)
GRIEVANT ALLEGES : _____

- 4) GRIEVANCE DENIED (BRIEFLY STATE REASONS) _____

- 5) GRIEVANCE SUSTAINED
- 6) IF GRIEVANCE SUSTAINED -STATE REMEDY _____

- 7) WAS THERE A PERSONAL CONFERENCE? YES____ NO ____
(IF "YES", PLEASE IDENTIFY DATE, LOCATIONAND PERSONS PRESENT)

SIGNATURE: _____ DATE: _____

PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT

GRIEVANCE FORM:

G-13 (Certificated)

REQUEST FOR ARBITRATION
(TO BE FILLED OUT IN QUADRUPPLICATE)

ORIGINAL TO: SUPERINTENDENT
COPY TO: BOARD OF EDUCATION
ASSISTANT SUPERINTENDENT FOR PERSONNEL

- 1) NAME OF GRIEVANT _____
- 2) DATE OF LEVEL III RESPONSE _____

**I hereby request that this grievance be submitted to arbitration.
Kindly request a panel from the California Conciliation Service so
that we may select an arbitrator.**

SIGNATURE: _____ DATE: _____

The above request is approved _____ denied _____ .

SIGNATURE: _____ DATE: _____
Association Representative