

GRIEVANCE REVIEW – PART 2

DATE STEP 1 GRIEVANCE FILED	DATE OF UC DECISION	DECISION ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	WAS A MEETING HELD? <input type="checkbox"/> YES <input type="checkbox"/> NO DATE OF MEETING:
STEP 1 DECISION (ATTACHED SEPARATE SHEET OF PAPER IF NEEDED)			
SIGNATURE OF STEP 1 REVIEWER	PRINTED NAME AND TITLE OF STEP 1 REVIEWER	TELEPHONE NUMBER	

FORM FOR APPEAL TO STEP 2

(Appeals may be filled with Campus Labor Relations Office on this form or in accordance with Article 6, Grievance and Arbitration)

<input type="checkbox"/> I DO NOT ACCEPT THE STEP 1 RESPONSE AND I APPEAL TO STEP TWO (STATE SUBJECT BELOW)	GRIEVANT'S AND/OR REPRESENTATIVE'S SIGNATURE	DATE	ARE YOU REQUESTING A MEETING? <input type="checkbox"/> YES <input type="checkbox"/> NO
UNRESOLVED ISSUES APPEALED TO STEP 2			

GRIEVANCE REVIEW – STEP 2

DATE STEP 2 APPEAL FILED	DATE OF UC DECISION	DECISION ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	WAS A MEETING HELD? <input type="checkbox"/> YES <input type="checkbox"/> NO DATE OF MEETING:
SIGNATURE OF STEP 2 REVIEWER		PRINTED NAME AND TITLE OF STEP 2 REVIEWER	