Smyrna School District and Smyrna Educators Grievance Form

Building:	
Assignment:	
Name of Grievant:	
Date:	
<u>Step 1</u>	
A: Date Cause of Grievance Occurred:	
B: Statement of Grievance:	
Relief Sought:	
Signature:	
Date:	
C: Disposition of Principal or Immediate Supervisor:	_
Signature of Principal or Immediate Supervisor:	
Date:	
D: Position of Grievant and/or Association:	
Signature:	
Date:	

Step 2

A: Date Received by Superintendent or Designee	
B: Disposition of Superintendent or Designee:	
Signature:	
Date:	
C: Position of Grievant and/or Association:	
Signature:	_
Date:	
<u>Step 3</u>	
A: Date Appeal Submitted for Arbitration:	
B: Disposition and Award of Arbitration:	