BOARD OF EDUCATION AND COUNCIL OF ADMINISTRATIVE AND SUPERVISORY EMPLOYEES (CASE) GRIEVANCE REPORT FORM

Informal I II III Date Grievance Filed	Official Use Only	(For clear copies, please type or use ball point pen)
Informal I II III Date Grievance Filed	Grievance No.	Level I filed with
School or Office Home Address Home Phone Zip Code Nature of Grievance (Attach additional sheets, if needed. Indicate Article and Section of Master Agreement deemed to be violated.) Remedy Sought	Level Processed (circle one)	Date Grievance Occurred
School or Office Home Address Home Phone Zip Code Nature of Grievance (Attach additional sheets, if needed. Indicate Article and Section of Master Agreement deemed to be violated.) Remedy Sought	Informal I II III	Date Grievance Filed
Home Address Home Phone Nature of Grievance (Attach additional sheets, if needed. Indicate Article and Section of Master Agreement deemed to be violated.) Remedy Sought	Name of Grievant	
Nature of Grievance (Attach additional sheets, if needed. Indicate Article and Section of Master Agreement deemed to be violated.) Remedy Sought	School or Office	
Nature of Grievance (Attach additional sheets, if needed. Indicate Article and Section of Master Agreement deemed to be violated.) Remedy Sought	Home Address	Home Phone
(Attach additional sheets, if needed. Indicate Article and Section of Master Agreement deemed to be violated.) Remedy Sought		Zip Code
deemed to be violated.) Remedy Sought		
deemed to be violated.) Remedy Sought		
deemed to be violated.) Remedy Sought		
deemed to be violated.) Remedy Sought		
deemed to be violated.) Remedy Sought		
	(Attach additional sheets, deemed to be violated.)	Level I filed with
Signed	Remedy Sought	
Signed		
	 Signed	

Send copies to: Community Superintendent, Principal (or other appropriate administrator), CASE, Retain one copy