## **Priority Charter Schools**





mployee Name			Date:
ob Tit	le:	Location:	
hone	Number:		
lame	of immediate supervisor		<u> </u>
uperv	risor's Title		_
las th	e grievance been discussed with your immedia	te supervisor? 🔲 Y	'es □ No
If ye	es, date of meeting		
1.	What is the action or situation about which you have a grievance? (Be as specific as possible as to names, dates, locations, or other pertinent information. Attach additional paper if more space is needed.)		
2.	What do you think should be done to resolve the grievance? (Attach additional paper if more space is needed.)		
	Employee's Signature		