

Sheepscot Valley RSU 12 – Sheepscot Valley Educator Association’s

GRIEVANCE FORM

Level I _____ Date Received _____
Level II _____ Date Received _____
Level III _____ Date Received _____

Grievant’s Name: _____

Work Location: _____

Job Title: _____

Description of Alleged Contract Violation: _____

Contract Provision(s) Violated (Be Specific): _____

Date of Occurrence of Alleged Violation: _____

Remedy Sought: _____

Signature of Grievant

Date

Signature of Association Representative

Date

Level I	Date Received by Grievant:	Decision: Attach Signed Decision
Level II	Date Received by Grievant:	Decision: Attach Signed Decision
Level III	Date Received by Grievant:	Decision: Attach Signed Decision

Grievance Resolved _____ Grievance Unresolved _____

Signature of President of SVEA

Date

Signature of Superintendent or his/her Designee

Date