

**STAFF COMPLAINTS AND GRIEVANCES**  
*(Grievance: Level Three Findings)*

This form provides the opportunity for an employee to question the application of a Board policy, regulation or procedure, or of an employee handbook, employee contract or existing law and to secure at the lowest administrative level an equitable, prompt and satisfactory solution. Complaints relating to discrimination or harassment will be resolved in accordance with policy AC.

**Grievant's Information**

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Work Location: \_\_\_\_\_  
Title: \_\_\_\_\_

**Level Three: Superintendent/Designee**

Date Grievance Received at this Level: \_\_\_\_\_  
Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Title: \_\_\_\_\_

Results of Level Three investigation of this report and conclusions. (Use additional sheet if necessary.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Corrective Action** (Use additional sheets if necessary.)

Is corrective action needed?  Yes  No  
If yes, state the type of corrective action that will be recommended.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Superintendent's/Designee's Signature \_\_\_\_\_  
Date

This response shall be presented to the grievant within ten (10) working days of receipt of this grievance at this level.

FILE: GBM-AF4  
Basic

BOARD POLICY ALLOWS BOTH FOR APPEAL OF THE SUPERINTENDENT'S DECISION AND THE OPPORTUNITY TO ADDRESS THE GRIEVANCE TO A HIGHER LEVEL OF AUTHORITY IF THE SUPERINTENDENT IS AN ALLEGED PARTY IN THE COMPLAINT. APPEALS MUST BE SUBMITTED IN WRITING WITHIN FIVE (5) WORKING DAYS OF THE ORIGINAL DECISION. PLEASE USE THE APPEAL FORM PROVIDED.

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*Note: The reader is encouraged to review policies and/or procedures for related information in this administrative area.*

Implemented: March 19, 2008

Revised:

Boonville R-I School District, Boonville, Missouri