

Name of Employee with Concern: \_\_\_\_\_

Phone: (w) \_\_\_\_\_ Dept: \_\_\_\_\_

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Check Filing Level

II - Must be filed within 10 working days from Level I response. Date filed: \_\_\_\_\_ Response date: \_\_\_\_\_

III - Must be filed within 10 working days from Level II response. Date filed: \_\_\_\_\_ Response date: \_\_\_\_\_

IV - Must be filed within 10 working days from Level III response. Date filed: \_\_\_\_\_ Response date: \_\_\_\_\_

***\*\*Each filing must be accompanied by a written statement indicating the reason why the proposed settlement at the prior level was not satisfactory.***

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Attach employee statement form.

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**FORMAL LEVEL RESPONSES**

Level II Response: Director of Human Resources Designee - Meet within 10 working days after receipt of concern/claim. \*Respond within 10 working days from Level II meeting date.  
***(See attached statement and response)***

Name of Designee: \_\_\_\_\_

Title of Designee: \_\_\_\_\_ Date Assigned: \_\_\_\_\_

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Level III Response: Director of Human Resources - \*Respond within 10 working days from receipt of concern/claim.  
***(See attached statement and response)***

Name: \_\_\_\_\_

Date: \_\_\_\_\_

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Level IV Response: Final Determination - CEO/Superintendent - \*Respond within 10 working days after Level IV concern/claim meeting.  
***(See attached statement and response)***

Name and Title: \_\_\_\_\_

Date: \_\_\_\_\_

Effective: 02/20/2007/29/2019