

UNIVERSITY OF ARKANSAS AT PINE BLUFF

GRIEVANCE PROCEDURES

STEP ONE

This form is to be used by the employee in filing a formal grievance. This form will be filled in completely and will serve without amendment as the source document for the grievance process. All supporting documentation must be attached to this grievance form.

Employee's Name _____ Job Title _____

Immediate Supervisor's Name _____

Employee's Work Location _____

GRIEVANCE STATEMENT

In order for a formal grievance to be processed, the following four (4) elements must be addressed:
(Attach additional pages if needed)

- 1) What was the date of the occurrence and what specific behavior, condition, or violation of policy or procedure occurred which you consider constitutes grievances?

- 2) How have you been adversely affected by this grievance?

- 3) What specific actions have you taken to reconcile and improve this situation?
Including discussing it with your immediate supervisor? What has been the outcome if these efforts?

- 4) What specific remedy do you request?

Employee's Signature _____

Date _____

UNIVERSITY OF ARKANSAS AT PINE BLUFF
GRIEVANCE PROCEDURES
STEP 2

REPLY TO EMPLOYEE GRIEVANCE
Immediate Supervisor

Supervisor's Signature _____

Date _____

EMPLOYEE'S ANSWER:

I accept the answer to my grievance.

I do not accept the answer to my grievance and wish to refer my grievance to the next step.

NOTE: Explain fully why you do not accept the above response/decision.

Grievant's Signature _____

Date _____

UNIVERSITY OF ARKANSAS AT PINE BLUFF
GRIEVANCE PROCEDURES
STEP 3

DEPARTMENT HEAD'S DECISION

Department Director

Department Director's Signature _____

Title _____

Date _____

EMPLOYEE'S ANSWER:

I accept the answer to my grievance.

I do not accept the answer to my grievance and wish to refer my grievance to the next step.

NOTE: Explain fully why you do not accept the above response/decision.

Grievant's Signature _____

Date _____

UNIVERSITY OF ARKANSAS AT PINE BLUFF
GRIEVANCE PROCEDURES
STEP 4

DEPARTMENT DEAN'S DECISION

Department Dean's Signature _____
Title _____ Date _____

EMPLOYEE'S ANSWER:

I accept the answer to my grievance.

I do not accept the answer to my grievance and wish to refer my grievance to the next step.

NOTE: Explain fully why you do not accept the above response/decision.

Grievant's Signature _____ Date _____

UNIVERSITY OF ARKANSAS AT PINE BLUFF
GRIEVANCE PROCEDURES
STEP 5

VICE CHANCELLOR'S DECISION

Vice Chancellor's Signature _____

Title _____

Date _____

EMPLOYEE'S ANSWER:

I accept the answer to my grievance.

I do not accept the answer to my grievance and wish to refer my grievance to the next step.

NOTE: Explain fully why you do not accept the above response/decision.

Grievant's Signature _____

Date _____

UNIVERSITY OF ARKANSAS AT PINE BLUFF
GRIEVANCE PROCEDURES
STEP 6
CHANCELLOR'S EMPLOYEE HEARING COMMITTEE
Chancellor of University
FINAL DECISION

Chairperson of Employee Hearing Committee Signature _____
Title _____ Date _____

EMPLOYEE'S ANSWER:

I accept the answer to my grievance.

I do not accept the answer to my grievance.

Grievant's Signature _____ **Date** _____

The above employee (grievant) has been afforded due process through established procedures at the University of Arkansas at Pine Bluff. The grievant has chosen to (circle one) ACCEPT/ REJECT the decision finalized at the level of Chancellor. Therefore, as Chancellor of the University of Arkansas at Pine Bluff, the final decision is the position of the University.

Chancellor's Signature _____ Date _____