



1785

The University of Georgia

®

GRIEVANCE & DISCIPLINE REVIEW POLICY PETITION FOR REVIEW

1. Complainant's name: _____

2. Employing unit: _____

3. Job title: _____

4. On-campus address/address of employing unit: _____

5. Home address: _____

6. On-campus phone number: _____

7. Home phone number: _____

8. Date of adverse employment action: _____

9. Date of policy violation (if this violation is continuing, please state and indicate the date on which the policy violation first occurred): _____

10. Submission date of complaint: _____

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11. Nature of the complaint: _____

12. History of resolution efforts: _____

13. Reason complainant disagrees with action taken by employing unit: _____

14. Complainant's requested resolution of complaint: _____

15. List of witnesses, relationship to complaint, and contact information: _____

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16. Identification of documents relevant to complaint (describe and attach): _____

17. Please state whether you are requesting an oral presentation before the Grievance Committee. If you do not specifically request an oral presentation before the Grievance Committee, a review of your complaint will be based upon the written record.
