

Faculty and Administrator Grievance Protocols

The University grievance policy (Working Policy §2.160 et seq.) is reserved for employment grievances *between a faculty member or administrator and a supervisor with authority over that employee when the employee believes the supervisor has directly taken an unjustified, incorrect, and/or unreasonable action that adversely affects the employee's employment.* As identified in the policy, this impact on employment would be tangible and examples would be letters placed in an employment file, demotions, reduced work based on employment contracts, etc. The following form is to be used by those filing grievances to ensure that process is followed and that the concern expressed qualifies for the grievance process.

After an initial conversation with the supervisor who, in the view of the grievant, has caused the grievance (Step 1), and if no satisfactory resolution can be found, the grievant will use this form to file an official, written grievance against the supervisor (Step 2). The employee should fill out this form within 15 business days after obtaining knowledge of the facts giving rise to the grievance. The written grievance will be logged by the HR Director, who will review and sign off on whether it meets the requirements of a grievance. Once the HR Director has completed his or her review, this form will be returned to the employee.

If the HR Director indicates on this form that this matter qualifies for the grievance process, the employee will send this grievance form to the supervisor whose action led to the grievance and have a second meeting to discuss the written document. The parties may, upon mutual agreement, invite a third party (such as the supervisor's direct report) to attend the meeting to assist in reaching a resolution. This second meeting shall take place within five (5) business days after the employee receives this form back from the HR Director.

The supervisor whose actions led to the grievance will respond to the grievant in writing—also on the grievance form—within five (5) business days after the second meeting. If a resolution is not found, this full document, along with any attached documents provided by the parties, will be forwarded to the President by the grievant within five (5) business days after receiving the supervisor's written response concerning the second meeting (Step 3). The President, as outlined in the grievance policy, will call a grievance committee of peers to review the submission and advise (Steps 4 and 5). The President will make the final judgement (Step 6).

In the case of an administrator with a direct report to the President, the President may be the individual taking the direct negative employment action. In that case only may the relevant employee petition to the chair of the Board who would be the final arbitrator in the case if it is not earlier resolved through the process outlined. In this situation, the chair of the Board of Trustees serves in the role of the president in all outlined processes.

Recourse if the Matter Does Not Qualify for the Grievance Process

The HR director will reject any grievance (or portion of any grievance) that does not qualify for the University's grievance process. If the HR Director so determines that one or more claims do not qualify for the grievance process, the grieving party may appeal the rejection of such claims in a writing delivered to the President within three (3) business days after receiving notice of the HR Director's rejection of such claims. The President's decision on this appeal shall be final and binding.

If the grievance is rejected only in part, the grieving party will be instructed to revise his or her written grievance within five (5) business days to include only those matters that qualify for grievance. To seek relief for actions taken by a co-worker (or for any other action that does not qualify for the University's grievance policy), the employee's options are limited. The employee may attempt to resolve the dispute with the other person directly or by involving the supervisor of either or both of them. The employee may also seek resolution through the ombudsperson and/or the HR Director. Regardless of whether a mutually satisfactory outcome is reached, all employees are required to conform their behavior at all times to University expectations.

Employee Grievance Form

1. Name of Employee: _____

2. Name of Supervisor
involved in grievance: _____

3. Name(s) of witnesses having information about this grievance (**general character witnesses are not allowed to participate**):

_____	_____
_____	_____
_____	_____
_____	_____

4. Describe the employment action leading to this grievance, including the date when this took place (*Note: a grievance should be started within 15 working days of the action that is being grieved*)

5. Describe why you believe this employment action is unjustified/unreasonable:

6. Describe how the supervisor's action has negatively impacted your employment:

7. Describe the specific relief you are seeking as a remedy for the alleged unjustified adverse employment action:

8. Please attach available supporting evidence related to this grievance.

Signature of Employee: _____
Date: _____

TO BE COMPLETED BY HUMAN RESOURCES

- The matter described above qualifies for the University grievance process
- The matter described above does not qualify for the University grievance process
- The matter described above qualifies in part, and fails to qualify in part, for the University grievance process.* Within five (5) business days, employee must resubmit this Employee Grievance Form to me after revising it to focus solely on the following action(s) that I, the HR Director, have determined to qualify for grievance:

Signature of HR Director: _____
Date: _____

*Notice of Right to Appeal: You have the right to appeal a determination that one or more of your claims does not qualify for the University's grievance process by a writing delivered to the President within three (3) business days.

Supervisor's Response to Grievance:

1. Please indicate whether you agree with the employee's description of the employment action resulting in this grievance. If you do not agree, please provide your own description:

2. Please describe why you took the above-described employment action:

3. In reviewing the submission of the employee and talking to him/her, please indicate whether you are willing to adjust the action taken that has led to the grievance? Give reasons for your answer:

4. Please attach available evidence supporting your defense of this grievance.

Signature: _____

Date: _____

Employee's Response to Supervisor's Response to Grievance

Please identify whether you are willing to accept the supervisor's response? Give reasons and provide any additional supporting evidence:

Please indicate whether you want to send the grievance to the next step?

- Yes
- No

If you answered "no," then this grievance is now considered closed.

If you answered "yes," then this form with attachments will be forwarded to the President's Office who will appoint a grievance committee to review this grievance.