



Staff Grievance and Appeal Form

Staff are advised to read through the Staff Grievance Policy and Procedure before lodging a grievance.

Staff name:

Date:

Staff ID:

Job Title:

Date of Hire:

Contact Phone Numbers:

Working Mailing Address:

Home Mailing Address:

Date, time and location of the grievance:

Details about the grievance:

What actions have you took to resolve the grievance?

The desired outcome for the grievance:

Signature: _____

Date: _____

Date complaint received: _____

By Grievance Officer: _____

Complaint No. : _____