

APPENDIX B

RANCHO SANTIAGO COMMUNITY COLLEGE DISTRICT  
STATEMENT OF GRIEVANCE FORM

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EMPLOYEE NAME

UNIT

DEPARTMENT

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Date of Alleged Grievance

Date of Informal  
Discussion - Level I

Date of Oral Response

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Date of Filing of this  
Statement

Specific Articles and Sections Alleged to Been Violated

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Employee's Statement of Alleged Violation and Grievance - What is the Factual Contention, what has occurred? Provide full facts necessary to support your position.

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State full relief, remedy, action you believe is required to resolve this alleged grievance.

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LEVEL II

Next Higher Supervisor/Manager or Designee Response  
to Alleged Grievance:

Date of Receipt:

Date of Response:  
Grievance Resolved:

Grievance Denied:

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LEVEL III

Administrator/Management or Designee Response  
to Alleged Grievance:

Date of Receipt:

Date of Response:  
Grievance Resolved:

Grievance Denied:



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LEVEL IV

Executive Vice Chancellor, Human Resources  
& Educational Services, or Designee Response  
to Alleged Grievance:

Date of Receipt:

Date of Response:  
Grievance Resolved:

Grievance Denied:

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LEVEL V

Chancellor or Designee Response  
to Alleged Grievance:

Date of Receipt:

Date of Response:  
Grievance Resolved:

Grievance Denied:

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WRITTEN NOTICE OF REQUEST FOR OPTIONAL FACT FINDING PANEL MUST BE  
FURNISHED WITHIN FIVE (5) DAYS TO THE CHANCELLOR

DATE OF EMPLOYEE NOTICE:

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LEVEL VI

Fact Finding Panel Response to Alleged Grievance:

Date of Receipt:

Date of Response:

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LEVEL VIIA

Board of Trustees with Optional Fact-Finding Panel  
Recommendation: The Final and Binding Decision of the  
Decision of the Board is:

Date of Receipt:

Date of Board Meeting:

Date of Decision:

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LEVEL VIIB

Board of Trustees Without Fact-Finding Panel  
Recommendation: The Final and Binding Decision of the Board is:

Date of Receipt:

Date of Decision:

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NOTES:

1. ATTACH ALL RESPONSES TO THIS FORM AT ALL LEVELS
2. MAINTAIN TWO (2) COPIES -- ONE FOR EMPLOYEE, ONE FOR DISTRICT
3. TIME IS OF THE ESSENCE AT EVERY STEP