

# Fremont RE-2 School District Certified Grievance Form

Name of Grievant: \_\_\_\_\_

Date Grievance Occurred: \_\_\_\_\_

Specific Violation (Board Policy/Personnel Practice and Procedure): \_\_\_\_\_

\_\_\_\_\_

Facts Giving Rise to the Violation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(If additional space is needed, you may attach a separate sheet.)

Relief Requested: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Grievant

\_\_\_\_\_  
Date this Grievance Form was received

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Date of Meeting with Supervisor: \_\_\_\_\_

\_\_\_\_\_

Decision of Supervisor: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Supervisor