

Alpine Union School District
Formal Grievance Form
California School Employees Association

(Please type or print)

Grievant Name: _____

School/Worksite: _____

Union Representative: _____

Date Cause of Grievance Occurred:

Alleged Violation (Article, Section & Lines of Agreement)

Nature of Grievance:

Resolution Sought:

Informal Level - I certify that this grievance was discussed informally with my immediate supervisor on the date of _____ and the following decision was rendered:

Employee Signature: _____ Date: _____