**GEARY COUNTY UNIFIED SCHOOL DISTRICT 475**

**JUNCTION CITY, KANSAS**

1. **Name of Grievant:** Click or tap here to enter text. **Filing Date:** December 3, 2021
2. **Building:**  Click or tap here to enter text.
3. **Date cause of action occurred:** Click or tap here to enter text.
4. **Relevant provision(s) in negotiated agreement:**

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1. **Level of Initial Filing**: 1 2 3 4 5
2. **Statement of Grievant’s claim**:

1. Statement of Grievant and Statement of Facts:

Click or tap here to enter text.

Relief Desired:  
Click or tap here to enter text.

Signature of Grievant (s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Please refer to negotiated agreement for specific timelines. The superintendent must be informed at all levels.