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| **PITTSBURG UNIFIED SCHOOL DISTRICT**  **GRIEVANCE FORM**  (To be used to initiate a grievance at Level I or II) |
| Directions: This form is to be completed by a member of the representation unit filing a grievance |

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| Name: | | |
| Address: | | |
| City: | State: **CA** | ZIP Code: |
| Email Address: | | |
| Phone Number: | | |
| Conferee (if any): | | |
| School Site: | | |
| Date Grievance Occurred: | | |
| Grievance: | | |
| Contract Provision(s) Violated, Misapplied, or Misinterpreted: | | |
| Specific Remedy Sought: | | |
| Conference Requested: YES  NO | | |

Grievant’s Signature:

Date:

Email form back to president@peateachers.org