## Penn State/PSUPOA Step 1 Grievance Form

1. Grievant (Last Name, First Name)*		2. Contact Phone		3	3. Work Location (Campus)	
4. Shift (Hours)	5. Immediate Supervisor			6	S. Supervisor Contact Phone	
7. Date of Incident	8. Article(s) & Section(s) Grieved			9. Names of Witness(es)		
10. Date and Summary of Discussion with Supervisor (if any):						
11. Employee's Description of Incident/Issue (Include: nature of grievance, names of those involved, harm to grievant (if any), etc.:						
12. Remedy or adjustment sought:						
13. Grievant Name Typed (in lieu of signature)			14. Date Emailed Step 1:			
*If there are multiple grievants, attach a list of names.  Step 1 Response						
15. Date Received Step 1	16. Signati	16. Signature of Chief/Designee			17. Date of Step 1 Meeting	
18. Grievance Response:						
$\square$ Resolved		☐ Denied				
19. Description of resolution or basis of denial:						
20. Date Emailed Grievance Response:			22. Grievance Number			

Note: Submit grievance form to poagrievance@psu.edu