Article 20: Grievance Process
Appendix M.2: Grievance Level 2 – Conciliation

MT. SAC
Mt. San Antonio College

Grievant Name: Click or tap here to enter text. Date: Click or tap here to enter text.

Contact #: Phone: Click or tap here to enter text. Email: Click or tap here to enter text.

Classification: Click or tap here to enter text.

GRIEVANT TO COMPLETE:

INSTRUCTIONS: The grievant must file this form with the Office of Human Resources **within 10 working days** of the unresolved **Level 1 –Initial Resolution**.

1. Indicate specific contract provisions which you believe have been violated.
   Click or tap here to enter text.
2. Date of event creating grievance.
   Click or tap here to enter text.
3. Date on which you learned that a violation of the specific provision of the Agreement had occurred.
   Click or tap here to enter text.
4. Name of your immediate administrator.
   Click or tap here to enter text.
5. Describe what actions you have taken to resolve the grievance. Be specific.
   Click or tap here to enter text.
6. Statement of grievance:
   Click or tap here to enter text.
7. Requested remedy.
   Click or tap here to enter text.
8. Date unresolved Level 1 process concluded.
   Click or tap here to enter text.
9. Grievant's Signature:
   Click or tap here to enter text. Date: Click or tap to enter date.

Grievant's Name: Click or tap here to enter text. Date: Click or tap to enter a

HUMAN RESOURCES TO COMPLETE:

10. Copy of form sent to:

☐ Faculty Association ☐ Vice President, Human Resources Date: Click or tap here to text.

11. Members of Conciliation Team:

Faculty Member – appointed by the Faculty Association

Click or tap here to enter text.

Administrator – appointed by the District

Click or tap here to enter text.

12. Date (s) of Conciliation meeting (within 10 working days of establishment of Conciliation Team).

Click or tap here to enter text.

13. Date of Decision

Click or tap here to enter text.

14. Team Outcome Submitted within 5 working days of meeting

Click or tap here to enter text.

Signatures:

Grievant: _____ Immediate Administrator: _____