MORENO VALLEY UNIFIED SCHOOL DISTRICT
CERTIFICATED GRIEVANCE FORM – Level 1 and 2

A grievance is a claim by an employee that an express term of the Certificated Employees Collective Bargaining Agreement has been violated by the District and that, because of such violation, an employee’s rights have been adversely affected.

Before submitting a written grievance, the grievant shall first have a conference with the employee’s immediate supervisor to present the grievance orally and to attempt to resolve it informally.

If the attempt at informal resolution is not successful, the grievance shall be reduced to writing using this form which must be submitted to the employee’s immediate supervisor within 20 working days of the claimed violation. The administrator shall answer the grievance in writing within 10 working days.

Employee Name: ___________________ Work Location: ___________________

Date of Grievance: Date First Noticed Grievance: ___________________
Date Filed: ___________________

Statement of Grievance: ___________________ (Example: Over in contractual class size numbers.)

Specific Sections and Terms of Agreement Violated: List the specific Contract Article Violated (Example: ARTICLE XIII – Class Size Section 2 (a)( )

Remedy Sought: List the remedy you want. (Example: If you want your class size to contractual numbers - Reduce class size to contractual limit. If you want to be paid for overages - Reduce to contractual limits or pay for class size overages)

Signature of Grievant: ___________________ Date: ___________________

LEVEL ONE: INFORMAL CONFERENCE

Name of Supervisor: ___________________ Date of Conference: ___________________

LEVEL TWO: IMMEDIATE SUPERVISOR

Supervisor Signature: ___________________ Date: ___________________

Immediate Supervisor’s Decision: ___________________

Grievance Resolved: ___________________ Decision Appealed: ___________________

Signature of Grievant: ___________________ Date: ___________________

RECORD COPY – ATTACH TO LEVEL 3, 4, 5 FORM IF GRIEVANCE IS NOT RESOLVED.
ASSOCIATION COPY – DETACH AND MAIL AFTER LEVEL 2
GRIEVANT COPY – DETACH AFTER LEVEL 2
MORENO VALLEY UNIFIED SCHOOL DISTRICT
CERTIFICATED GRIEVANCE FORM – Level 3, 4, 5

LEVEL THREE: SUPERINTENDENT
(Submit within 10 days of Level Two decision)

Superintendent’s Signature: ___________________________ Date received: ____________
Superintendent’s Decision: __________________________________________________________________________
Grievance Resolved: ___________________________ Decision Appealed: ______________
Signature of Grievant: __________________________________________ Date: ____________
If Level Three decision is appealed, submit immediately to MV Caucus, V.P.

LEVEL FOUR: MEDIATION BY ASSOCIATION
(Submit within 10 days of Level Three decision)

Date of Request for Mediation: __________________________________________
Date of Request for Mediator Submitted to CSCS __________________________________________
(Submit within 5 days of request for mediation)
Decision of Mediator: ____________________________________________________________________________
Grievance Resolved: ___________________________ Decision Appealed: ______________
Signature of Grievant: __________________________________________ Date: ____________

LEVEL FIVE: ARBITRATION
(Submit within 10 days of Level Four decision)

Date of Request for Mediation: __________________________________________
Name of Arbitrator agreed to: ____________________________________________________________________
Decision of Arbitrator: __________________________________________

Bring your grievance to MVEA Office to get your Grievance Number. You will take the Grievance and copies (3) to HR and get them all TIME/DATE Stamped. RETURN one of the copies to the MVEA Office.