



# OXNARD SCHOOL DISTRICT

1051 South "A" Street • Oxnard, California 93030 • 805/487-3918

## CALIFORNIA SCHOOL EMPLOYEES ASSOCIATION (CSEA)

### LEVEL 1: EMPLOYEE GRIEVANCE FORM

1. NAME OF GRIEVANT \_\_\_\_\_
2. DATE GRIEVANCE FILED \_\_\_\_\_
3. WORK LOCATION \_\_\_\_\_
4. POSITION \_\_\_\_\_
5. ADMINISTRATOR ALLEGED TO HAVE VIOLATED THE CONTRACT \_\_\_\_\_

6 STATEMENT OF GRIEVANCE (Include contract provision[s] allegedly violated; summarize violation, location, date[s], witness [es], times).

GRIEVANT ALLEGES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. REMEDY REQUESTED \_\_\_\_\_  
\_\_\_\_\_

8. WAS THERE AN INFORMAL CONFERENCE? YES  DATE \_\_\_\_\_

PERSON(S) PRESENT: \_\_\_\_\_

DECISION OF INFORMAL CONFERENCE \_\_\_\_\_

IF NO , INDICATE REASON \_\_\_\_\_

9. ASSOCIATION REPRESENTATIVE (If Applicable) \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Distribution:  Assistant Superintendent, HR  Grievant  Administrator  CSEA President

