

FORMAL GRIEVANCE PROCEDURE

THIS FORM **MUST** BE COMPLETED AT EACH STAGE OF THE PROCEDURE. PLEASE INDICATE WHICH STAGE IS BEING INVOKED.

GRIEVANCE TO BE CONSIDERED AT STAGE 1 / 2 *

* delete as appropriate

Please complete all sections of Part A when registering a formal grievance. Where possible, please arrange for the form to be typed or use capital letters.

PART A	TO BE COMPLETED BY THE EMPLOYEE
Name _____	Job Title _____
Department _____	Section _____
Employee No. _____	Location _____
Your Contact Tele. No. _____	Line Manager _____
Please outline the nature of the grievance (using no more than 2/3 sentences)	
Please provide full details of the grievance including dates wherever possible. (if necessary continue on a separate sheet of paper). Copies of any relevant documents that relate to the grievance should also be attached.	
<p>If the grievance relates to unacceptable behaviour please refer to the behavioural standards guidance in the first instance. I confirm that I have followed the above guidance prior to submitting this formal grievance Please circle Yes No Not applicable</p>	
<p>In accordance with the Grievance Procedure you have the right to be accompanied at the Grievance Meeting by a trade union representative or suitable work colleague. If being represented by a Trade Union, please provide the following details :-</p>	
Name of Trade Union _____	Name of TU Rep or companion _____
Contact Tele. No. _____	
What outcome are you seeking to resolve your grievance?	

APPENDIX B

SIGNED	DATE
PART B <i>TO BE COMPLETED BY THE DEPARTMENT</i>	
DATE RECEIVED	_____
RECEIVED BY	_____ JOB TITLE _____