

**GRIEVANCE FORM FOR
ADMINISTRATIVE, PROFESSIONAL AND TECHNICAL STAFF**

This form is to be used by an individual employee who is not covered by the terms and conditions of a collective agreement and who wishes to file a grievance concerning the application of the University policies and procedures to his or her employment situation. This form is to be used in accordance with the Policy and Procedures for Resolving Grievances for Administrative, Professional and Technical Staff.

NAME: _____

DEPARTMENT: _____

JOB TITLE: _____

NATURE OF GRIEVANCE: (Please describe the nature of the problem and provide any supporting information that you believe is relevant. Attach separate pages if required.)

-

-

REMEDY SOUGHT:

DATE: _____

SIGNATURE: _____