

DISTRICT/UTLA ITINERANT
ALTERNATE GRIEVANCE PROCEDURE:
DISPUTE RESOLUTION PANEL FORM/CHECKLIST
FOR ITINERANT ASSIGNMENTS

Region/ Administrative/ Supervisory Area: _____ Administrator: _____
Address: _____ Telephone No: _____
_____ Region: _____

Issue: (check one)

Itinerant Arts

Nurses

PSA

☐

PSW

☐

School Psychologists

☐

***Special Education**

***Special Education: Adapted PE Citywide, Carlson Hospital Citywide, Deaf ED, Occupational & Physical Therapy Citywide, Special Education Infant, Speech and Language Therapist Citywide, Visually Impaired Citywide.**

Affected Employee: _____ Employee No: _____
(Must be in permanent status)

CHECKLIST (Note time lines)

1. _____ **Date employee knew or should have known of initial assignment**
2. _____ **Date of INFORMAL Meeting** (*Employee must request a meeting with administrator at the Region/ Administrative/Supervisory level (Chapter Chair, optional) within 3 days of #1 above. Such meeting shall be conducted within 3 days of the request.*)
3. _____ **Date of FORMAL Meeting.** (*Employee must request a meeting with administrator at the Region/ Administrative/Supervisory level and Chapter Chair within 3 days of #2 above. Such meeting shall be conducted within 3 days of the request.*)
4. _____ **Date of (Circle One) Resolution or Non-Resolution of Administrator and Chapter Chair.** (*Determination made within 3 days of #3 above. If there is agreement, sign below and process stops here. If there is non-agreement, sign below and continue with #5 and #6 below.*)

Administrator's Signature

Print Name

Employee Number

Chapter Chair's Signature

Print Name

Employee Number

Complete Items 5 and 6 below ONLY if there is non-agreement in # 4 above

5. _____ **Date when employee files formal written complaint with administrator, Staff Relations** (*formerly Employee Performance Accountability*) **and UTLA asking for the Dispute Resolution Panel** (*must be submitted within 3 days of non-agreement as noted in Item #4 above*).
6. _____ **Date this form then email to the Staff Relations Field Director assigned to your region/chapter.**

Email this form to Juan Alfayate, jalfayat@lausd.net, (213-241-8233) and cc Claudia Padilla, cpadilla@utla.net, (213-637-5147).

If selected, a Dispute Resolution Panel will be dispatched through the Staff Relations Unit.