

# Grievance Information Sheet

You have indicated a desire to have a grievance filed on your behalf.  
UTLA will need the following information to file and process a grievance.

Please Print Clearly

1. **Name:** \_\_\_\_\_
  2. **Employee #:** \_\_\_\_\_
  3. **Address:** \_\_\_\_\_
  4. **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_
  5. **Phone Number(s):** *Hm* - (    ) \_\_\_\_\_ - \_\_\_\_\_ *Cell* - (    ) \_\_\_\_\_ - \_\_\_\_\_
  6. **School or location:** \_\_\_\_\_
  7. **Site Administrator:** \_\_\_\_\_
  8. **Your non-LAUSD E-mail Address:** \_\_\_\_\_
- 
- 

I. Who is involved?

- a. *Grievant* \_\_\_\_\_
- b. *Administrator involved (Name/Title)* \_\_\_\_\_
- c. *Witness (es)* \_\_\_\_\_

II. When and where did it happen? (Provide specific date) \_\_\_\_\_

III. When will 30 school days expire? \_\_\_\_\_

IV. Was there a mandatory informal conference with principal? **Yes**    **No**

\_\_\_\_\_

- a) If so, when requested? \_\_\_\_\_ (***This must be requested within 15 work days.***)
- b) When was it held? \_\_\_\_\_
- c) If not, did the principal refuse to hold it? Yes \_\_\_\_ No \_\_\_\_
- d) Did the principal refuse to allow representation by the Chapter Chair? Yes \_\_\_\_ No \_\_\_\_
- e) Please attach principal's written response to the informal conference.

V. **FACTS:** What did some administrator do or fail to do that gives rise to the complaint?

\_\_\_\_\_

Continued on next page – Page 1 of 2

VI. Why is it grievable?

a. Specifically what is wrong with "what happened"? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b. What specific contract language was violated (cite article, section, paragraph, page number, etc.) \*For any cases under Article X (Evaluation and Discipline) please attach copy of evaluation or disciplinary notice.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VII. What must be done to make the grievant whole? What remedy do you propose?

a. Corrective action or remedy requested  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b. What would we settle for?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VIII. Signature and date:

*Please sign and date the spaces indicated to give your permission for us to file a grievance on your behalf, and cut-and-paste your signature on the official Grievance Form.*

<u>  X  </u> _____ Date _____
-------------------------------

This form and any supporting documents **must be faxed only** to this number: 213-368-6256

**Do Not fax your paperwork to any other fax number**

**It is your responsibility to call UTLA – 213/ 487-5560 to verify**

**Our receipt of your Grievance Information Sheet and any related documents**

Please remember that grievances must be filed in a timely manner