PERSONNEL-MANAGEMENT RELATIONS EMPLOYEE GRIEVANCES

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Exhibit A – Employee Complaint Form – Level One

Note: Informal resolution is encouraged but does not extend any deadlines in DGBA(LO-CAL), except by mutual written consent. Whistleblower complaints must be filed within the time specified by law and may be made to the College President or designee beginning at Level Three.

To file a formal complaint, please fill out this form completely and submit it by hand delivery, electronic communication, or U.S. Mail to the appropriate administrator or designee within the time established in DGBA(LOCAL). All complaints will be heard in accordance with DGBA(LEGAL) and (LOCAL) or any exceptions outlined therein.

Name:

Address:

Telephone number:

Email address:

Position:

Campus/Department:

If you will be represented in presenting your complaint, please identify the person representing you. If the person representing you will participate by telephone conference call, please check the box below. The College District will inform you if the equipment necessary for telephone representation is unavailable.

□ Representation will be by telephone conference call.

Please note: You must designate a representative who will be participating in person or by telephone with an advance notice of at least three days, or the College District may reschedule the conference or hearing to a later date.

Name:

Address:

Telephone Number:

Email address:

Please describe the decision or circumstances causing your complaint (give specific factual details).

Please attach any supporting documentation to this form.

What was the date of the decision or circumstances causing your complaint?

Please explain how you have been harmed by this decision or circumstance.

Please describe any efforts you have made to resolve your concerns and the responses to your efforts. Please include dates of communication and whom you communicated with regarding your concerns.

Please describe the outcome or remedy you seek for this complaint.

Employee's signature:

Signature of employee's representative:

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Date of filing:

Complainant, please note:

A complaint form that is incomplete in any material way may be dismissed but may be refiled with all the required information if the refiling is within the designated time for filing a complaint.

Attach to this form any documents you believe will support the complaint; if unavailable when you submit this form, they may be presented no later than the Level One conference. Please keep a copy of the completed form and any supporting documentation for your records.

Exhibit B – Level Two Appeal Notice

To appeal a Level One decision, or the lack of a timely response after a Level One conference, please fill out this form completely and submit it by hand delivery, electronic communication, or U.S. Mail to the appropriate administrator within the time established in DGBA(LO-CAL). Appeals will be heard in accordance with DGBA(LEGAL) and (LOCAL) or any exceptions outlined therein.

Name:

Address: Telephone number: Email address: Position: Campus/Department:

If you will be represented in presenting your appeal, please identify the person representing you. If the person representing you will participate by telephone conference call, please check the box below. The College District will inform you if the equipment necessary for telephone representation is unavailable.

□ Representation will be by telephone conference call.

Please note: You must designate a representative who will be participating in person or by telephone with an advance notice of at least three days, or the College District may reschedule the conference or hearing to a later date.

Name:

Address:

Telephone Number:

Email address:

Who held the Level One conference?

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Date of conference:

Date you received a response to the Level One conference:

Please explain specifically how you disagree with the outcome at Level One.

Attach a copy of your original Level One complaint and any documentation submitted at Level One.

Attach a copy of the Level One response being appealed, if applicable.

Employee's signature:

Signature of employee's representative:

Date of filing:

Complainant, please note:

A complaint or appeal form that is incomplete in any material way may be dismissed but may be refiled with all the required information if the refiling is within the designated time for filing a complaint or appeal.

Please keep a copy of the completed form and any supporting documentation for your records.

Exhibit C – Level Three Appeal Notice

To appeal a Level Two decision, or the lack of a timely response after a Level Two conference, please fill out this form completely and submit it by hand delivery, electronic communication, or U.S. Mail to the College President within the time established in DGBA(LOCAL). Appeals will be heard in accordance with DGBA(LEGAL) and (LOCAL) or any exceptions outlined therein.

Name:

Address:

Telephone number:

Email address:

Position:

Campus/Department:

If you will be represented in presenting your appeal, please identify the person representing you. If the person representing you will participate by telephone conference call, please check the box below. The College District will inform you if the equipment necessary for telephone representation is unavailable.

□ Representation will be by telephone conference call.

Please note: You must designate a representative who will be participating in person or by telephone with an advance notice of at least three days, or the College District may reschedule the conference or hearing to a later date.

Name:

Address:

Telephone Number:

Email address:

Who held the Level Two conference?

PERSONNEL-MANAGEMENT RELATIONS EMPLOYEE GRIEVANCES DGBA (EXHIBIT)

Date of conference:

Date you received a response to the Level Two conference:

Please explain specifically how you disagree with the outcome at Level Two.

Attach a copy of your original Level One complaint and any documentation submitted at Level One and a copy of the Level Two appeal notice.

Attach a copy of the Level Two response being appealed, if applicable.

Employee's signature:

Signature of employee's representative:

Date of filing:

Complainant, please note:

A complaint or appeal form that is incomplete in any material way may be dismissed but may be refiled with all the required information if the refiling is within the designated time for filing a complaint or appeal.

Please keep a copy of the completed form and any supporting documentation for your records.

Exhibit D – Level Four Appeal Notice

To appeal a Level Three decision, or the lack of a timely response after a Level Three conference, please fill out this form completely and submit it by hand delivery, electronic communication, or U.S. Mail to the College President within the time established in DGBA(LOCAL). Appeals will be heard in accordance with DGBA(LEGAL) and (LOCAL) or any exceptions outlined therein.

Name:

Address:

Telephone number:

Email address:

Position:

Campus/Department:

If you will be represented in presenting your appeal, please identify the person representing you. If the person representing you will participate by telephone conference call, please check the box below. The College District will inform you if the equipment necessary for telephone representation is unavailable.

□ Representation will be by telephone conference call.

Please note: You must designate a representative who will be participating in person or by telephone with an advance notice of at least three days, or the College District may reschedule the conference or hearing to a later date.

Name:

Address:

Telephone Number:

Email address:

Who held the Level Three conference?

PERSONNEL-MANAGEMENT RELATIONS EMPLOYEE GRIEVANCES DGBA (EXHIBIT)

Date of conference:

Date you received a response to the Level Three conference:

Please explain specifically how you disagree with the outcome at Level Three.

Do you want the Board to hear this appeal in open session?

Yes

🗆 No

If so, the Board will consider your request; however, you may not have a legal right under the Texas Open Meetings Act to require a meeting in open session.

Attach a copy of your original Level One complaint and any documentation submitted at Level One and a copy of the Level Two and Level Three appeal notices.

Attach a copy of the Level Three response being appealed, if applicable.

Employee's signature:

Signature of employee's representative:

Date of filing:

Complainant, please note:

A complaint or appeal form that is incomplete in any material way may be dismissed but may be refiled with all the required information if the refiling is within the designated time for filing a complaint or appeal.

Please keep a copy of the completed form and any supporting documentation for your records.