



GRADUATE ASSISTANT GRIEVANCE FORM

Employee/Grievant Name: _____ Department: _____

Job Title/Position: _____

Phone: _____ Email: _____

Graduate Assistant Employment Agreement/Manual provision(s) violated:

Brief Description of the Nature of Complaint/Dispute (include specific details and incident date(s) and a description of informal efforts attempted, if any):

Action/Remedy Requested:

Employee Signature

Date

EMAIL A COPY OF THIS FORM TO: IMMEDIATE SUPERVISOR, DEO, elr-help@uiowa.edu, and uihc-elr@uiowa.edu

Received by: _____

Date: _____

GRADUATE ASSISTANT GRIEVANCE FORM (CONT'D)

Employee/Grievant: _____

Level 2: I am filing this grievance at Level 2 to Dean of the College or Vice President of the Division: (Name) _____

Employee Signature _____ Date _____

ATTACH: Level 1 Response

EMAIL A COPY OF THIS FORM TO: DEAN or VP, elr-help@uiowa.edu, and uihc-elr@uiowa.edu

Received by: _____ Date: _____

Level 3: I am filing this grievance at Level 3 VP for Human Resources and Dean of the Graduate College: (Name) _____

Employee Signature _____ Date _____

ATTACH: Level 1 and 2 Responses

EMAIL A COPY OF THIS FORM TO: VPHR, GRAD COLLEGE DEAN, elr-help@uiowa.edu, and uihc-elr@uiowa.edu

Received by: _____ Date: _____

Arbitration Procedure: Grievant may submit a grievance to arbitration, provided written notice of intent to arbitrate is delivered to the office of the Vice President for Human Resources within twenty-one (21) days following receipt of the decision in Level 3 of the grievance procedure.