INTERNAL GRIEVANCE PROCESS INFORMAL DISCUSSION FORM

(To be completed by supervisor upon employee making request for Informal Discussion with supervisor.)

This form must be used to document a discussion between supervisor/management and an employee who has a grievable issue as established in accordance with the SHRA Grievance Policy, effective February 1, 2016. An Informal Discussion must occur within 15 calendar days of the alleged event or action that is the basis of the grievance. The employee must clearly declare to the supervisor or other appropriate personnel that the Informal Discussion request is regarding an alleged event or action that is the basis of a potential grievance. The informal process should be completed within a 15 calendar day timeframe.

NAME AND BANNER ID#		
CONTACT NUMBER:		
NAME AND TITLE OF SUPERVIOSR:		
DEPARTMENT WHERE EMPLOYED:		
ALLEGED EVENT OR ACTION THAT IS THE BASIS OF A POTENTIAL GRIEVANCE:		
EMPLOYEE'S DESIRED RESOLUTION:		

Date Informal Discussion was requested by the employee	⊇:		
Name of Supervisor to whom request for Informal Discus	ssion was made:		
Date supervisor contacted Human Resources to report notice of Informal Discussion:			
Date Informal Discussion was conducted with empl	oyee:		
(To be completed upon completion of the informal discussion)			
Was a satisfactory resolution achieved through this Informal Discussion? Yes \square No \square			
If answer is "Yes," describe agreed-upon resolution here:			
If answer is "No," did supervisor communicate Formal Grievance process to employee? Yes \square No \square (IMPORTANT REMINDER: If the employee desires to proceed to the Formal Internal Grievance process, intent must be filed with the Office of Human Resources within 15 calendar days of the alleged incident.)			
ACKNOWLEDGEMENT THAT INFORMAL DISCUSSION WAS CONDUCTED AND FINALIZED			
Employee Print Name	Employee Signature Date		
Supervisor Print Name	Supervisor Signature Date		