

Formal grievances (with the exceptions of the disciplinary actions that can be grieved under UNC-GA SHRA Grievance Policy, and of non-disciplinary separation from employment due to unavailability), employees will be required to have an Informal Discussion with their supervisor(s) or other appropriate representative regarding the alleged event or action to attempt to address complaints or concerns at the lowest possible level prior to filing a formal grievance. For allegations of unlawful or prohibited discrimination, harassment, or retaliation, employees will now utilize an [Equal Employment Opportunity Informal Inquiry](#) process to attempt to first address the complaint.

PART 1: PERSONAL INFORMATION

| | | | |
|-------------------------|----------------------|---|----------------------|
| Your Full Name: | <input type="text"/> | Home/Cell Phone: | <input type="text"/> |
| Position Title: | <input type="text"/> | Work Phone: | <input type="text"/> |
| Temporary: (YES OR NO) | <input type="text"/> | Email: | <input type="text"/> |
| Home Street Address: | <input type="text"/> | Case #: (office use only) | <input type="text"/> |
| Home, City, State, Zip: | <input type="text"/> | Empl ID: (office use only) | <input type="text"/> |
| Department Name: | <input type="text"/> | Hire Date: (office use only) | <input type="text"/> |
| Campus Work Location: | <input type="text"/> | Career State Employee Status: (office use only) | <input type="text"/> |
| Immediate Supervisor: | <input type="text"/> | 2nd-Level Supervisor: (office use only) | <input type="text"/> |

PART 2: SPECIFIC CONCERN(S)

Date of alleged event or action that is the basis of the complaint:

State specific concern(s) or complaints(s):

PART 3: INFORMAL PROCESS

Have you already met with your supervisor (or higher level manager) to try and resolve your concern? NO YES

Date of meeting:

Who did you meet with (provide name/title):

Did you receive a written response from the person you met with: NO YES

Date of response (attach copy to this document):

PART 4: RESOLUTION RESULTS

What would you like to have happen:

PART 5: CERTIFICATION

Signature: Date: