

ESCAMBIA EDUCATION ASSOCIATION

Official Grievance Form

NAME(S): \_\_\_\_\_

SCHOOL: \_\_\_\_\_ ASSIGNMENT: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

DATE CAUSE OF GRIEVANCE OCCURRED: \_\_\_\_\_

RELATES TO ARTICLE(S): \_\_\_\_\_ OF CONTRACT

STATEMENT OF GRIEVANCE:

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RELIEF SOUGHT: \_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

File Dates(s): Level 1 \_\_\_\_\_ Level II \_\_\_\_\_ Level III \_\_\_\_\_