

WASHINGTON UNIFIED SCHOOL DISTRICT
WSTA GRIEVANCE FORMAL RESOLUTION—LEVEL TWO

Employee Name: _____ Site: _____

The grievant does not agree with the District’s decision of the informal conference resolution and the Level One decision. (Attach written responses from informal conference and District’s Level One form and decision.)

Informal Conference Date: _____ Date Response Received: _____

Formal Level One Filed: _____ Date Response Received: _____

Reasons for appeal: _____

Grievant’s Signature: _____

Submitted to Supervisor: _____ Date: _____

Signature

Note: Superintendent or designee shall communicate the decision to the grievant within fifteen (15) work days.