APPENDIX D GRIEVANCE REPORT FORM HINSDALE SCHOOL DISTRICT

Complete with cop	pies to:	
	 Principal Superintendent Federation 	
То	Principal	
SCHOOL:	NAME OF GRIEVANT:	DATE FILED:
Date of Grievance		LEVEL A
	f Grievance (be sure to include the speact agreement):	ecific violation or condition with proper references
2. Relief Soug	ht:	
Signature of Griev	ant	Date
Answer given by F	Principal:	
Signature of Princi	inal	Date
Position of Grievan	-	Date
Signature of Griev	 ant	Date

LEVEL B

Date received by Superintendent:		
Answer given by Superintendent:		
Signature of Superintendent	Date	
Position of Grievant:		
Signature of Grievant	Date	

LEVEL C

Date received by School Board:		
Answer given by School Board:		
Signature of Board Chair	Date	
Position of Grievant		
Signature of Grievant	Date	
5-5	2	

LEVEL D

Date submitted to Arbitrator:		
Disposition of Arbitrator:		
Signature of Arbitrator	Date	