



Notice of Grievance Committee Selection

Date: _____

To: _____

Address: _____

From: _____

Grievance Officer

College Title

Office Phone Number

You are hereby notified that _____ (name of grievant) has officially requested a grievance hearing in regard to the attached alleged grievance and has identified

_____ as the respondent(s).

The first step in response to this request will be to select a Grievance Committee from the College's Grievance Pool.

Grievance Committees are selected by lot, by the Grievance Officer, with the grievant and respondent(s) present. The selection of the Grievance Committee will take place:

Date: _____

Time: _____

Place: _____

To select a Grievance Committee, it is required that the grievant and respondent(s) are present. If you request an alternative method of selection, it must be agreed upon by the Grievance Officer, grievant, and respondent(s).

If you have any questions, you may contact me at the phone number listed above.

Grievance Officer's Signature

(Copy of completed form 2534/005 must be attached.)