Faculty Grievances Form - Academic Regulation 4.7.4

To file a grievance under Academic Regulation 4.7.4, this form (and any attachments) must be completed and submitted to the Faculty Grievance Liaison (FGL) and the Office of Human Resources, either electronically or physically. **Please be advised, if a grievant makes a claim of discriminatory acts prohibited by law or by University Policy or Regulation, the grievance shall immediately be referred to the Office of Human Resources which may delay or prohibit the procedures prescribed in Faculty Grievance Regulation 4.7.4.** As the grievant, you are responsible for meeting the requirements stated in Regulation 4.7.4 for filing a grievance.

Grievant Information

Name: First _____   Middle Initial _____   Last _____

Department _____   College _____

Position Title _____

Contact Information: Cell Phone   Campus Phone _____

Email Address _____

Grievance Information

Type of Grievance:

_____ Allegation that existing University policies, rules, regulations, practices, and/or procedures have been violated, misinterpreted, and/or improperly applied.

_____ Allegation that standards of academic freedom, behavior, and/or practices have been breached by persons covered under Regulation 4.7.4.

_____ Allegation that actions involving the grievant were unfair, inequitable, arbitrary, or capricious.

Respondent Information
Name and title of person(s) responsible for alleged improper actions (the "Respondent(s)"):

Name: Title:
Name: Title:
Name: Title:

Date of Adverse Action forming the basis of the grievance: _____

State the specific reason(s) for this grievance:

State the specific redress or relief being requested:

Statement of Non-Retaliation: Faculty members have the right to use this procedure free from threats or acts of retaliation, coercion, restraint, discrimination, or reprisal. Faculty members may not be retaliated against for participating in a Grievance.

Certification: I hereby certify that all information submitted on this Grievance From is true and complete to the best of my knowledge and belief.

Signature _____   **Date** _____