ADR #	
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business days.

## I. Dispute

Full Name of Grievant:	Job Title/Position Sought:	
Department:  □ Check this box if you are an applicant seekin selection.  NOTE: Requests for appeal must be submitted notification.		
Home Address:	Work Telephone No.	Home Telephone No.
	( ) - ext. Work E-mail Address:	( ) - ext. Home E-mail Address:
Date Incident Occurred:	Witnesses:	
The issues are (use attachments if necessary)	):	
The facts supporting this are (use attachmen	ts if necessary):	
The remedy I want is (use attachments if nec	essary):	
(**************************************	,,,	
Date: Signature of Grie	evant:	
Requests for ADR must be presented to the i	mmediate supervisor within ten (10) bu	isiness days. If the dispute alleges
discrimination or retaliation by the immedia		
□ Pursuant to the ALTERNATIVE DISPUTE RES		
through Four and opt instead to proceed dire		

to Step Five must accompany this form in writing and be presented to the Department of Human Resources within ten (10)

# II. Step One - Immediate Supervisor

Date Received:				
Response (use attacl	hments if necessary):			
Date:	Step One		Telephone No.:	
	Respondent's Signature:		( ) -	ext.
	Signature.			
Date Received:				
Grievant's s response		ations in a thin ADD Decreating the Department	at af Illumana Bassumana	
	request to Step Two.	eturning the ADR Request to the Departmer	it of Human Resources.	
Grievant's reasons fo	or further appeal (use a	attachments if necessary):		
Date:		Grievant's Signature:		
NOTE: The Grievant timeframe.	is responsible for havin	g the ADR Request delivered to the proper p	erson or office and within t	he appropriate

## III. Step Two - Department Head

Date Received:									
Response (use attac	hments if necessary):								
Date:	Step Two					hone No		a	
	Respondent's Signature:				(	)	-	ext.	
Date Received:									
Grievant's response									
	Two response and am request to Step Thre		R Request to	the Departm	nent of	Human	Resource	es.	
	or further appeal (use		ecessary <b>):</b>						
Date:		Grievant's Sign	ature:						
NOTE: The Grievant	is responsible for hav	ing the ADR Regi	uest delivered	to the prope	er perso	n or off	ice and w	vithin the	
annionista timofra		y tile ADN Negt	acsi aciiveieu	to the prope	persu	0. 0))	ice alla W		

#### **IV. Step Three - Director of Human Resources**

Date Received:	-		
Response (use attac	hments if necessary):		
Date:	Step Three		Telephone No.:
	Respondent's Signature:		( ) - ext.
	Signature.		
Data Danais and			
Date Received:			
Grievant's response			
	Three response and a Trequest to the Step F	m returning the ADR Request to the Depart	ment of Human Resources.
		e attachments if necessary):	
Date:		Grievant's Signature:	
NOTE: The Grievant		ring the ADR Request delivered to the prope	er person or office and within the

# V. Step Four - Chief Clerk/Chief of Staff or Deputy Chief Clerk/Deputy Chief of Staff

Date Received:								
Response (use attachmen	ts if necessary):							
Date:	Chief Clerk/Ch			Telep	hone No	o.:		
Date:	or Deputy Chie	ief of Staff f Clerk/Deputy Chief	of Staff	Telep	hone No	o.: -	ext.	
Date:			of Staff				ext.	
Date:	or Deputy Chie		of Staff				ext.	
Date:	or Deputy Chie		of Staff				ext.	
Date:  Date Received:	or Deputy Chie Signature:		of Staff				ext.	
Date Received:	or Deputy Chie Signature:		of Staff				ext.	
Date Received:	or Deputy Chie Signature:	f Clerk/Deputy Chief		(	)	-		
Date Received:  Grievant's response (chec	or Deputy Chie Signature: k one): esponse and am	f Clerk/Deputy Chief		(	)	-		
Date Received:	or Deputy Chie Signature: k one): esponse and am est to Step Five.	f Clerk/Deputy Chief	quest to the Depa	(	)	-		
Date Received:  Grievant's response (chectoric laccept the Step Four record ladvance my ADR reques	or Deputy Chie Signature: k one): esponse and am est to Step Five.	f Clerk/Deputy Chief	quest to the Depa	(	)	-		
Date Received:  Grievant's response (chectoric laccept the Step Four record ladvance my ADR reques	or Deputy Chie Signature: k one): esponse and am est to Step Five.	f Clerk/Deputy Chief	quest to the Depa	(	)	-		
Date Received:  Grievant's response (chectoric laccept the Step Four record ladvance my ADR reques	or Deputy Chie Signature: k one): esponse and am est to Step Five.	f Clerk/Deputy Chief	quest to the Depa	(	)	-		
Date Received:  Grievant's response (chectoric laccept the Step Four record ladvance my ADR reques	or Deputy Chie Signature: k one): esponse and am est to Step Five.	f Clerk/Deputy Chief	quest to the Depa	(	)	-		
Date Received:  Grievant's response (chectoric laccept the Step Four record ladvance my ADR reques	or Deputy Chie Signature: k one): esponse and am est to Step Five.	f Clerk/Deputy Chief	quest to the Depa	(	)	-		
Date Received:  Grievant's response (chectoric laccept the Step Four record ladvance my ADR reques	or Deputy Chie Signature: k one): esponse and am est to Step Five.	f Clerk/Deputy Chief	quest to the Depa	(	)	-		
Date Received:  Grievant's response (chectoric laccept the Step Four record ladvance my ADR reques	or Deputy Chie Signature: k one): esponse and am est to Step Five.	f Clerk/Deputy Chief	quest to the Depa	(	)	-		
Date Received:  Grievant's response (chectoric laccept the Step Four record ladvance my ADR reques	or Deputy Chie Signature: k one): esponse and am est to Step Five.	f Clerk/Deputy Chief	quest to the Depa	(	)	-		
Date Received:  Grievant's response (chectoric laccept the Step Four record ladvance my ADR reques	or Deputy Chie Signature: k one): esponse and am est to Step Five.	f Clerk/Deputy Chief	quest to the Depa	(	)	-		
Date Received:  Grievant's response (chectoric laccept the Step Four record ladvance my ADR reques	or Deputy Chie Signature: k one): esponse and am est to Step Five.	f Clerk/Deputy Chief	quest to the Depa	(	)	-		
Date Received:  Grievant's response (chec   I accept the Step Four re   I advance my ADR reque Grievant's reasons for furt	or Deputy Chie Signature: k one): esponse and am est to Step Five.	returning the ADR reattachments if neces	quest to the Depa	(	)	-		

#### VI. Step Five - Panel Review

Date Received:								
Response (use attachmen	ts if necessary):							
Date:	Chief Clerk/Ch			Teleph				
	or Deputy Chi Signature:	ef Clerk/Deputy Chief of Sta	off	(	)	-	ext.	
Date Received:								
Grievant's response (chec						_		
☐ I accept the Step Five re Grievant's reasons for furt	<b>sponse and am</b> <b>ther appeal (</b> Use	returning the ADR request to attachments if necessary):	to the Depar	tment o	Huma	n Resou	rces.	
1								
		T						
Date:		Grievant's Signature:						