

MONTGOMERY COUNTY PUBLIC SCHOOLS

SEIU Grievance Form

Department of Labor Relations
 MONTGOMERY COUNTY PUBLIC SCHOOLS
 850 Hungerford Drive, Room 55, Rockville, Maryland 20850

INSTRUCTIONS

To file a grievance, an employee should reach out to SEIU, Local 500 at 301-740-7100. SEIU will obtain a register number on your behalf and file with the Department of Labor Relations (DLR). For more information, see Article 6, *Grievance Procedures*, in the Negotiated Agreement between SEIU and the Board of Education of Montgomery County. Contact SEIU or contact DLR at 240-740-6320 or DLR@mcpsmd.org.

GRIEVANT INFORMATION (*print or type*)

Employee ID# _____	SEIU Representative: _____
Grievant Name _____	SEIU Signature _____
School/Work Location _____	Date ____/____/____
Title/Position _____	

REGISTER #: _____ **all grievances must have a register number to be heard.*

Name of MCPS Office filed with _____	Date of alleged violation ____/____/____
Describe alleged violation of Contract	Section of Agreement Violated
State redress or remedy requested	Supervisor/Hearing Officer _____

STEP ONE

Disposition: <input type="checkbox"/> Denied <input type="checkbox"/> Granted <input type="checkbox"/> Withdrawn <input type="checkbox"/> Other	DLR Processing
Reason:	Appeal received
	Date ____/____/____ Initials _____
	Appeal disposition
	Date ____/____/____ Initial _____
	Supervisor/Hearing Officer _____
Administrator/Hearing Officer Signature _____	Date ____/____/____

STEP TWO

The union and grievant hereby request a Step Two grievance investigation.

Union representative signature _____ Date ____/____/____

Disposition: Denied Granted Withdrawn Other

Reason:

DLR Processing

Appeal received

Date ____/____/____ Initials ____

Appeal disposition

Date ____/____/____ Initial ____

Hearing Officer

***If blank, please see attached hearing decision*

Hearing Officer's Signature _____ Date ____/____/____

STEP THREE

The Union and grievant hereby requesting a Step Three grievance investigation.

Union representative signature _____ Date ____/____/____

Disposition: Denied Granted Withdrawn Other

Reason:

DLR Processing

Appeal received

Date ____/____/____ Initials ____

Appeal disposition

Date ____/____/____ Initial ____

Superintendents Designee/
Hearing Officer

***If blank, please see attached hearing decision*

Superintendent of Schools/Designee Signature _____ Date ____/____/____

STEP FOUR: ARBITRATION

The Association may move to Arbitration by setting forth the precise question it proposes to arbitrate, the section of the Agreement violated and a description of the action taken that initiated the grievance and submitting this request in writing to DLR within the designated timelines.

After the Administrator/Hearing Officer issues a decision the original grievance form and administrator's response should be returned to SEIU by U.S. Mail or Pony to the Union at SEIU Local 500, 900 Russel Ave., Suite 300, Gaithersburg, MD, 20879. A copy should be kept for your files, a copy given/sent to the grievant, and a copy sent to MCPS DLR, CESC, Room 55, via Pony or email at DLR@mcpsmd.org.