



COLEG POWYS

PERSONNEL
Ref: Grievance
Date June 06
Edition: 1

GRIEVANCE FORM

NAME: _____ **SITE:** _____

SECTION: _____ **JOB TITLE:** _____

Describe briefly the nature of the grievance:

Please indicate any suggested action for resolving your grievance:

Signature: _____ **Date:** _____
(Employee)

Director of Finance & Corporate Services Comments:

Signature: _____ **Date:** _____

Please forward the completed form to the Personnel Officer at the Newtown site,
keeping a copy for your records