

**POMONA UNIFIED SCHOOL DISTRICT**  
**GRIEVANCE ACTION FORM**

LEVEL 2 – FORMAL WRITTEN GRIEVANCE

Date Filed: \_\_\_\_\_

TO: Immediate Administrator

Due within ten (10) days of the date of the Level 1 Conference.

Name of Grievant \_\_\_\_\_

Site \_\_\_\_\_ Assignment \_\_\_\_\_

A. 1. Date and time alleged violation occurred: \_\_\_\_\_

2. Contractual Section allegedly violated: \_\_\_\_\_

\_\_\_\_\_

3. Person who allegedly violated terms of Contract: \_\_\_\_\_

B. Description of Grievance

C. Specific Remedy Sought

D. Date of Informal Conference (Level 1) with Immediate Administrator \_\_\_\_\_

E. Decision Rendered at Level 1

\_\_\_\_\_  
Signed (Grievant)

Original    Immediate Administrator

Copies    Grievant  
            Associated Pomona Teachers

Revised May 2003