

UNIVERSITY EXECUTIVE STAFF GRIEVANCE PROCEDURE

GRIEVANCE FORM

I. Grievance

Employee's Full Name:	Job Title:
School/Unit Name:	
Home Address:	Preferred Phone Number:
	Preferred E-Mail Address:
Date Grievance Occurred:	
The issues are (use attachments if necessary):	
General summary of the information and identity of person(s) or document(s) known to the grievant supporting your position (use attachments if necessary):	
The relief I want is (use attachments if necessary):	
Date:	Employee's Signature:
<i>Grievances must be submitted within 30 calendar days of the date the employee knew or should have known of the issue being grieved. The University Executive Staff Grievance Committee and Process is available on UVA's website, contains complete instructions for initiating, processing, and pursuing grievances. Contact UVA Human Resources if you have any questions. Completed form should be emailed to employeerelations@virginia.edu, dropped off in-person at the Human Resources Office at 2420 Old Ivy Road, Charlottesville, VA 22904, or mailed to P.O. Box 400127, Charlottesville, VA 22904-4127.</i>	

II. First Resolution Step – Supervisor Resolution

Date Received:	Date of Meeting:
Response (use attachments if necessary):	
Date:	First Step Respondent's Signature:
	Telephone No.: () - ext.
Date Received: _____	
Employee's response (check one):	
☐ I conclude my grievance and am returning it to UVA HR. ☐ I advance my grievance to the second step: UVA HR or ADR (Please Check One)	
If ADR, please specify which office: _____	
Employee's comments (optional - [use attachments if necessary]):	
Date:	Employee's Signature:



III. Second Resolution Step – UVA HR/ADR Resolution

Date Received:		Date of Meeting:	
Response (use attachments if necessary):			
Date:	Second Step Respondent's Signature:	Telephone No.: () - ext.	
Date Received: _____			
Employee's response (check one):			
• I conclude my grievance and am returning it to UVA HR. • I advance my grievance to the third step.			
Employee's comments (optional - [use attachments if necessary]):			
Date:	Employee's Signature:		

IV. Third Resolution Step – Initiation of Grievance

Date Received by UVA HR:	
Received by:	Telephone No.: () - ext.
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IV. Eligibility Determination

<i>Within 3 calendar days of the receipt of this form, UVA HR will forward form to the Chair of the University Staff Grievance Counsel (USGC) to determine if the matter qualifies for a for a Hearing. The Chair of the USGC will provide in writing to UVA HR, the Grievant, and the supervisor of the Grievant with the eligibility determination within 7 calendar days of receiving the grievance. If the Chair of USGC determines the grievance is not eligible for hearing, the grievant will have 7 calendar days from the date of decision to request review by the Chief HR Officer (CHRO).</i>
<i>Copy of this Grievance Form and any attachments to be attached and retained in confidential file in UVA HR.</i>

V. Review of Decision by CHRO

(Only to be completed if the Chair of USGC deems grievance ineligible for Hearing)

Note: Appeals must be made to CHRO within 30 calendar days of the date of Eligibility Determination.	
Reason for Appeal (use attachments if necessary):	
New Evidence (use attachments if necessary):	
Explain Materiality or Relevance to the Outcome (use attachments if necessary):	
Date:	Employee's Signature:
Date Received:	

<i>Within 10 calendar days of receiving the appeal, the CHRO shall communicate a decision in writing to the parties, the supervisor's manager, the USGC, and UVA HR. This review decision is final and not subject to further appeal.</i>
<i>Copy of this Grievance Form and any attachments to be attached and retained in confidential file in UVA HR.</i>