

INDIANA UNIVERSITY SOUTHEAST GRIEVANCE FORM

Please read the IU Southeast Grievance Process (flow chart) prior to filing a complaint: <http://www.ius.edu/studentaffairs/pdf/GrievanceProcessChart.pdf>

CONTACT INFORMATION		
Complainant's Name: <input type="checkbox"/> Student <input type="checkbox"/> Staff <input type="checkbox"/> Faculty	Daytime Phone/Cell:	University ID: IUS Academic and/or work unit:
Respondent's Name: <input type="checkbox"/> Student <input type="checkbox"/> Staff <input type="checkbox"/> Faculty	Contact information if known (phone, university department, class, student organization):	University ID if known: IUS Academic and/or work unit if known:
GRIEVANCE INFORMATION		
Date of Occurrence: Note: Must be within 10 business days of filing	Have you discussed this issue with your supervisor and/or a University Employee? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> not applicable Date(s) of discussion:	Supervisor/Employee's Name: Phone:
<p>Issue of Grievance: (Please read the list of issues that are grievable on the back of this form.)</p> <p>List specific problem(s)/issue(s). Example: harassment, violation of federal and state employment laws, etc.</p> <p>For clarification of the issue(s) of your grievance, please provide statements regarding the alleged discriminatory practice, decision and or circumstance which is the subject of this grievance. (Describe what happened, when and where, how your employment or student experience has been affected, and indicate names of others involved. Attach any supporting documentation.)</p> <p>Relief Requested: Indicate the action(s) that would resolve your grievance.</p>		

My signature indicates that the information contained on this form and attachments to this form are true and factual to the best of my knowledge.

_____ Date _____ Complainant's Signature

Group Grievance: If this is a group grievance, attach a list of all persons who are parties to the grievance. The list must include each person's name, university ID, day time phone number, and signature. The list must also designate one individual as spokesperson for the group.

For University Office Use Only

_____ Date Received _____ Signature of University Officer

Note: Grievance is not officially filed until this form is submitted to one of the University Offices (see back) Dev. 3/08

Grievable Issues—discrimination or violations regarding the following:

- EEO/AA (defined)
 - Race or Ethnic Group
 - Color
 - Religion
 - Disability
 - Gender
 - Age (over 40)
 - Status as a Disabled Veteran
 - Status as a Vietnam-era Veteran
 - Sexual Harassment
- Violations to the IU Code of Student Rights, Responsibilities, and Conduct
- Violations to University policy
- Law Violations
- HR Policy Violations
- Condition of Work Violations
- Employee Disciplinary Action Violations

To submit the Grievance Form, mail, email, fax, or hand-deliver the form to the applicable office below (see Grievance Process Chart — www.ius.edu/studentaffairs/pdf/GrievanceProcessChart.pdf)

Office of Equity & Diversity

4201 Grant Line Road, US Room 231

(812) 941-2306

(812) 941-2549 (fax)

EqDiv@ius.edu

<http://www.ius.edu/EqDiv/complaint.cfm>

Office of Student Affairs

4201 Grant Line Road, US Room 155

(812) 941-2420

psylvest@ius.edu

Office of Academic Affairs

4201 Grant Line Road, US Room 152

(812) 941-2208

(812) 941-2170 (fax)

tandrews@ius.edu

Office of Human Resources

4201 Grant Line Road, US Room 244

(812) 941-2356

(812) 941-2556 (fax)

HR@ius.edu