FACULTY GRIEVANCE FORM

To file a grievance under Section 607 of The Code of the University of North Carolina and UNCSA Policy 7.5, this form (and any attachments) must be completed and submitted to the Office of Faculty Affairs and the Faculty Grievance Committee Chair, either electronically, by certified mail, or by another means that provides proof of delivery; or physically. Note: Reasons faculty may file a grievance center around perceptions of violation of university and UNC system codes, policies and procedures. Reasons NOT eligible for filing grievances include non-reappointment, termination and suspension of employment.

university and UNC system codes, por reappointment, termination and susp	•	asons NOT eligible for filing grievances include non-
GRIEVANT INFORMATION Name: First	Middle Initial	Last
Department	Position Title	
Contact Information: Home Address		
Home Phone	Cell Phone	
Campus Phone		
Campus Email	Personal Email	
RESPONDENT INFORMATION Name and title of person(s) respons Name	sible for alleged improper d Title	lecision (the "Respondent(s)"):
Name	Title	
Name	Title	
Date of administrative decision (adv	verse action) forming the b	asis of the grievance:
1		of the grievance, names of parties involved and dates r grievance. (Attach additional pages if necessary):
What specific resolution are you see	eking?	
		have the right to use this procedure free from threats or sal. Faculty members may not be retaliated against for
CERTIFICATION: I hereby certify the best of my knowledge and belief		itted on this Grievance Form is true and complete to
Signature	Date	