



## Formal Grievance Form

Name:

Phone Number:

Address:

City, State, Zip:

Email Address:

Relationship to  
Achievement Prep:

Please state the nature of your grievance (attach additional sheets if necessary):

Please state the resolution requested (attach additional sheets if necessary):

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Level I: Administrative Disposition – To be completed by the Principal/Supervisor

Date Received: \_\_\_\_\_ Date of Meeting: \_\_\_\_\_

Action as a Result of Grievance:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If you wish to request a review of the resolution offered by the principal/supervisor, you may do so by forwarding this form with a note explaining your reason for disagreement with the decision to the CEO.*

Level II: Administrative Disposition – To be completed by the CEO

Date Received: \_\_\_\_\_ Date of Meeting: \_\_\_\_\_

Action as a Result of Grievance:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_