University of Maine System  
Non-Represented Employee Grievance  
Step 1

Instructions: Complete this form and deliver it to your Department Director (or Dean or next level appropriate administrator). Please be specific and concise.

To: ________________________________
From: ________________________________
Date: _______________________

I am filing a grievance in accordance with the Grievance Procedure for Non-Represented Employees.

1. Name of grievant(s) (if more than one grievant, list all and specify one to whom all correspondence will be sent):  -------------------------------------------------------------------------------------------------  

2. Name(s) of individuals whose action or decision is being grieved:  -------------------------------

3. Specify date, time, place, and other relevant circumstances surrounding the alleged violation:  ____________________________________________________________________

4. Name(s) and contact information for witnesses if any: ____________________________________________

5. University policy or procedure that has allegedly been violated: ________________________

Attach a separate sheet giving a clear statement of the grievance, including any applicable policies, procedures, or rules. Briefly describe actions previously taken to resolve this grievance.

Signature: ___________________________________

Copy to: Campus Grievance File
         Grievant

OHR 8/05
University of Maine System
Non Represented Employee Grievance Appeal

Check one: Step 2 ___ or Step 3___

Instructions: Complete this form and deliver it to your Vice President/Senior Staff member (if filed at Step 2) or President/Chancellor (if filed at Step 3). Please be specific and concise. Attach original grievance and all responses and appeals filed on this matter.

To: ______________________________
From: ______________________________
Date: ______________________________

Date of receipt of (check one) Step 1 ___ or Step 2 ___ response: _______________________

I am appealing the (check one) Step 1 ___ or Step 2 ___ response to the attached grievance for the following reasons (state specific reasons for the appeal, attach additional sheets if necessary):
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Signature: _______________________________

Copy to: Campus Grievance File
Grievant

OHR 8/05