

# INTERNAL GRIEVANCE PROCESS

## INFORMAL DISCUSSION FORM

*(To be completed by supervisor upon employee making request for Informal Discussion with supervisor.)*

*This form must be used to document a discussion between supervisor/management and an employee who has a grievable issue as established in accordance with the UNC System SPA Grievance Policy, effective May 1, 2014. An Informal Discussion must occur within **15 calendar days** of the alleged event or action that is the basis of the grievance. The employee must clearly declare to the supervisor or other appropriate personnel that the Informal Discussion request is regarding an alleged event or action that is the basis of a potential grievance. The informal process should be completed within a **15 calendar day** timeframe.*

Employee Name \_\_\_\_\_ Banner ID \_\_\_\_\_

Immediate Supervisor/Other Appropriate Supervisor Name and Title  
\_\_\_\_\_

Department Where Employed \_\_\_\_\_

**Alleged Event or Action that is the Basis of a Potential Grievance** *(Use back of this form if more space is needed):*

**Employee's Desired Resolution** *(Use back of this form if more space is needed):*

Date Informal Discussion was requested by the employee \_\_\_\_\_

Name of Supervisor to whom request for Informal Discussion was made \_\_\_\_\_

Date supervisor contacted Human Resources to report notice of Informal Discussion \_\_\_\_\_

Date Informal Discussion was conducted with employee \_\_\_\_\_

Was satisfactory resolution achieved through this Informal Discussion?  Yes  No

*If answer is "Yes," describe agreed-upon resolution here (Use back of this form if more space is needed.):*

*If answer is "No," did supervisor communicate Formal Grievance process to employee?*  Yes  No

**(IMPORTANT REMINDER:** If the employee desires to proceed to the Formal Internal Grievance process, intent must be filed with the Office of Human Resources within 15 calendar days of the alleged incident.)

### **ACKNOWLEDGEMENT THAT INFORMAL DISCUSSION WAS CONDUCTED AND FINALIZED**

\_\_\_\_\_  
Employee Print Name and Signature Phone Date

\_\_\_\_\_  
Supervisor/Appropriate Manager Print Name and Signature Phone Date