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| State of WisconsinDepartment of Administration Division of Personnel ManagementDOA-15806 (C02/2022) |  | **Grievance Number** FOR AGENCY USE ONLYClick or tap here to enter text. |
| **WLEA****EMPLOYEE GRIEVANCE REPORT****Step 1:**  Grievance is to be submitted to your designated agency representative within 21 calendar days of the date the grievant first became aware of, or should have become aware of, the cause of such grievance. **Step 2:** Grievance is to be submitted to the appointing authority or designee within 14 calendar days of the receipt of the step 1 answer.**Step 3:**  Grievances which have not been settled may be appealed to Arbitration within 30 calendar days from the step 2 answer or from the date the answer was due. Grievances involving discharge must be appealed within 15 calendar days of the step 2 answer or from the date the answer was due. |

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| Please Check OneThis is a **Step 1** Grievance [ ] This is a **Step 2** Grievance [ ] This is a **Step 3** Grievance [ ]  | Please Check One[ ]  Individual Grievance[ ]  Union Grievance[ ]  Group Grievance | Grievance Alleges Violation ofArticle      Section       |
| Last Name, First Name, MI | Agency/Division |
|       |       |
| Employing Unit | Work Unit | Supervisor |
|       |       |       |
| Headquarter Location | Hours of Work |
|       |       |
| Classification | Preferred Email Address |
|       |       |
| Home Address | Preferred Telephone |
|       |       |
| Grievance Subject (Please Check One) |
|            |
| Grievance Summary |
|       |
| Relief Sought |
|       |
| Date Submitted |  | Received By |
|       |  |       |