

Employee Concerns and Issues

In line with our interest based approach to problem solving, employees should use this form to raise issues, concerns, or other items for resolution in an informal manner. Do not use this form for matters that are a violation of state law (i.e. sexual harassment and/or discrimination, workplace violence, formal grievances, etc.).

Name: _____ Date: _____

Work Location: ARC BEDC CRC DO FLC FM SCC Other _____

Telephone (home): _____ Telephone (work): _____

When did the issue arise (date and time)?

Who was involved?

What was the issue(s)?

How would you like this issue resolved?

Attach additional pages as necessary.

Has this information been shared with your supervisor? Yes No

If yes, what was the outcome?

If not, you are encouraged to share with your supervisor unless he/she is one of the parties involved.

Complainant Signature: _____ Date: _____

Completed form should be directed to one of the following: Appropriate Associate Vice President, Appropriate Vice President, College Equity Officer, or Human Resources.