



Email grievance@wearecnta.org to obtain the number.

Grievance #

Grievance Form

Name:

Date of Violation:

Site:

Administrator:

Grievant Phone #:

Problem:

Article(s) violated:

Proposed Resolution:

☐Grievance L1

☐Grievance L2

☐Grievance L3

☐Grievance L4

☐No Grievance

Grievant/CNTA Representative

DATE

CNUSD Administrator

DATE