



## Process for Employees

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### Step 1. Contact the Direct Supervisor/Campus Principal

The most direct route to resolving a concern is to confer directly with the person involved, whether it is a department member, assistant principal, or supervisor, etc. More than 95% of concerns are resolved by a conversation between those involved. If your concerns are not resolved by informally meeting with the person involved, you should contact your direct Supervisor or Campus Principal. These individuals are responsible for the operation of the school or the department and can provide explanations and clarification of policies and procedures, and specific campus, department, and district information.

### Step 2. Level I Complaint/Grievance Process

If your concerns are not resolved by meeting with the appropriate department member, campus administrator, the campus principal, or direct supervisor, a formal Level I complaint/grievance may be necessary. You can access the **Employee Level I Complaint/Grievance Form** by going to [www.emsisd.com](http://www.emsisd.com) and clicking on the “Staff” tab and then clicking on “Complaints/ Grievances” tab. This form can be provided to you in hard copy format upon your request to the Campus Principal or Direct Supervisor. \***Note: According to Board Policy DGBA (LOCAL), a Level I Complaint/Grievance MUST be filed within 15 days of the date the employee first knew, or with reasonable diligence should have known of the decision, action, or circumstance giving rise to the complaint or grievance.** The Employee Level I Complaint/Grievance Form can be submitted to [Grievance@ems-isd.net](mailto:Grievance@ems-isd.net), hand delivered, or mailed to the Director of Compliance and Policy.

### Step 3. Level II Complaint/Grievance Process

If your concerns are not resolved by the Level I Complaint/Grievance Process, contact the Director of Compliance and Policy at 817-232-0880 or via email at [Grievance@ems-isd.net](mailto:Grievance@ems-isd.net). You can access the **Level II Employee Complaint/Grievance Form** by going to [www.emsisd.com](http://www.emsisd.com) and clicking on the “Staff” tab and then clicking on “Complaints/ Grievances” tab. This form can be provided to you in hard copy format upon your request to the Director of Compliance and Policy. \***Note: According to Board Policy DGBA (LOCAL), a Level II Complaint/Grievance Appeal Notice MUST be filed in writing on the form provided by the district within 10 days of the date of the written Level I response.**

### Step 4. Level III Complaint/Grievance Process

If your concerns are not resolved by the Level II Complaint/Grievance Process, you may appeal the Level II decision to the members of the EMS ISD Board of Education. The Level III appeal notice must be filed in writing, on a form provided by the District. The Superintendent or designee shall inform the student or parent of the date, time, and place of the board meeting at which the complaint will be on the agenda for presentation before to the Board. A Board Member may be required to recuse him or herself if he or she has been involved in the complaint/grievance process prior to the Level III hearing. You can access the **Level III Employee Complaint/Grievance Form** by going to [www.emsisd.com](http://www.emsisd.com) and clicking on the “Staff” tab and then clicking on the “Complaints/Grievances” tab. \***Note: According to Board Policy DGBA (LOCAL), a Level III Complaint/Grievance Appeal notice MUST be filed in writing on the form provided by the district within 10 days of the date of the written Level II response.**



# EAGLE MOUNTAIN SAGINAW ISD

*Fostering a Culture of Excellence*

## Level I Employee Complaint/Grievance Form

To file a formal complaint in accordance with Board Policy DGBA (LOCAL), please fill out this form completely and submit via email to [Grievance@ems-isd.net](mailto:Grievance@ems-isd.net), or by hand or standard mail delivery to the Director of Compliance and Policy, 1600 Mustang Rock Road, Fort Worth, TX 76179. All formal complaints/grievances will be heard in accordance with DGBA (LEGAL and LOCAL).

DATE OF FILING: \_\_\_\_\_

EMPLOYEE NAME: \_\_\_\_\_

POSITION: \_\_\_\_\_

CAMPUS/DEPARTMENT: \_\_\_\_\_

DIRECT SUPERVISOR NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

**1. State in detail the facts of the incident, event, or the series of events supporting or causing your complaint and the name of the individual (provide specific information).**

**2. State the date(s) of the incident, event, or series of events causing your complaint.**

