**S**s o l u t i o n**T**s to ef f**E**e c t ive p r**P**o b l e m s**S**o lv ing

Process for Employees

**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 1 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, hand delivered, or mailed to the Director of Policy and Information Management.

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

If your concerns are not resolved by the Level I Complaint/ Grievance Process, contact the Director of Policy and Information Management at 817-232-0880 or via email at 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 the “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.



**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, or by hand or standard mail delivery to the Director of Policy and Information Management, 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.**





1. **Explain how you have been affected or impacted by the incident, event, or series of events causing your complaint.**
2. **State in detail the efforts you have made to resolve your complaint informally, i f applicable.**
3. **State the outcome or remedy you seek for this complaint/grievance.**

**Employee Signature:**

**Please Note:**

A complaint/grievance or appeal form that is incomplete in any material aspect may be dismissed but may be re-filed with all the required information if the re-filing is within the designated time for filing a complaint/grievance.

You may attach to this form any documents or records you believe will support the complaint/grievance; if unavailable when you submit this form, the documents and records may be presented at the Level I Meeting **ONLY**. Please maintain of copy of all forms and supporting documentation for your records.

