



Montgomery County, Office of Labor Relations

Grievance Form for County Grievance Procedure

FILING INSTRUCTIONS – For more information about the County Grievance Procedure, contact the Office of Labor Relations and review Section 34 of the Montgomery County Personnel Regulations.

- 1. Complete this form and give a copy, along with any supporting documentation, to your supervisor. Failure to provide your supervisor with a copy of your grievance may delay the process. Send one copy and any attachments to the Office of Labor Relations, 101 Monroe Street, Rockville, MD, 20850.
2. Do/Will you have representation? If so, please provide name: Mailing address: Phone no.:
3. Would you be interested in Alternative Dispute Resolution? Yes No

Failure to provide complete information may delay the processing of your grievance.

FILING INFORMATION: (Please Print Clearly)

Employee's Name: Position Title: Grade:
Department/Division/Section: Immediate Supervisor:
Home Address:
Phone: Home: Work: E-mail address:

GRIEVANCE STATEMENT --You must cite the specific written policy, regulation, or treatment in which you believe a violation or inequity occurred. Please attach additional information if more space is needed. Failure to provide complete information may delay the processing your grievance.

RELIEF REQUESTED

Employee's Signature: Date:

DEPARTMENT/SUPERVISOR INFORMATION In order to respond to the employee's grievance, please complete the Grievance Response Form, which can be obtained from the Office of Labor Relations.