

State Law Enforcement Bargaining Council (SLEBC) and State of Nebraska

If the immediate supervisor did not make the grieved decision, they shall note that fact on this form in the space below (First Step) sign it, and forward the form to the person who made the decision within two (2) workdays, skipping any levels of intermediate supervision.

FIRST STEP	Date Received
Decision Maker's Response: (Use extra pages if necessary)	
Decision Maker's Signature	Date Answered
Grievant's Signature	Date Received

In the event the grievance is not resolved at the first step, the grievance may be appealed to the Agency Head and/or their designee within ten (10) workdays from receipt of the answer in Step One. The Grievance Form shall be presented to the Agency Head within ten (10) workdays of receipt of the answer from Step One. The agency head or designee shall file, in writing, an answer to the grievant within fifteen (15) workdays of the receipt of the grievance. A copy of the answer shall be provided to the Council.

SECOND STEP	Date Received
Agency Head's Response: (Use extra pages if necessary)	
Decision Maker's Signature	Date Answered
Grievant's Signature	Date Received

If the grievance is not resolved satisfactorily at Step Two, the grievant may, within fifteen (15) workdays from receipt of the answer in Step Two, appeal in writing through the DAS-Employee Relations Administrator to Arbitration.

THIRD STEP TO ARBITRATION

Please submit to:

DAS – Employee Relations, 1526 K Street, Suite 120, PO Box 95061, Lincoln, Nebraska 68509-5061

Signature of Employee (Employee's signature must appear here)	Date
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If someone other than yourself will be representing you in this grievance, please indicate the name, address and telephone number of your representative.

Name	Address (City, State, ZIP)	Telephone Number
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