



**GRIEVANCE NON-COMPLIANCE NOTIFICATION FORM**

Requested: \_\_\_\_\_  
(MM/DD/YR.)

Step # \_\_\_\_\_

Complaint # \_\_\_\_\_

Non-Compliance Addressed To: \_\_\_\_\_  
(First) (MI) (Last)

Name of Person Sending Non-Compliance: \_\_\_\_\_  
(First) (MI) (Last)

**Instructions: Use this form as notification of non-compliance at any step of the grievance process. This serves to notify the addressee that you have not complied with the City's grievance procedure due to the following ( State which step the non-compliance occurred):**

\*\*\*\*\*  
*Please Take Notice:* That compliance must occur within five (5) working days of your receipt of this notice or a decision may be made in my favor  
\*\*\*\*\*

\_\_\_\_\_  
Signature of Person Sending Non-Compliance (MM/DD/YR)

(HR Form # 23)

- DISTRIBUTION**
- White To Next Step
  - Green HR Copy
  - Yellow Grievant's Copy
  - Pink Appointing Authority's Copy
  - Canary Immediate Supervisor's Copy

<b>HR USE ONLY</b>
Date Rec'd.: _____
Log Date: _____
By: _____