



Employee's Name: _____ Today's Date: _____
Position Title: _____ Sheriff's Office Division: Detention Patrol
Work Phone Number: _____ Division Section (if applicable): _____
Work Mailing Address: _____
Home Mailing Address: _____
Date of Grievable Event: _____ Time of Grievable Event: _____
Name of Immediate Supervisor: _____

INSTRUCTIONS: The Grievance procedure begins with an *Informal Resolution*. If an informal resolution cannot be achieved, the grievant may file a formal grievance. A formal grievance includes three *Levels*;

- Level 1: Formal written grievance with the next highest level in the chain of command.
- Level 2: Written appeal to the Sheriff.
- Level 3: Written appeal to the County Manager.

This County prescribed form corresponds to Level 1.

If you are considering initiating a grievance, you should review the complete Grievance procedures outlined in the *2018-2020 Agreement between the County of Humboldt and the Humboldt County Law Enforcement Employees Association Article 18 Grievance Procedure*. A copy of this agreement can be obtained online via Humboldt County's website at <https://www.hcnv.us/302/Collective-Bargaining-Agreements> or in person at the Human Resources Department;

50 West Fifth Street Room 205
Winnemucca, Nevada 89445

You must provide the following information:

1. The date of the grievable event (insert above in the designated field).
2. A detailed description of the grievance event, including names of other persons involved, if any.
If you choose to attach pages to describe, please indicate the number of pages attached; _____

{CONTINUED ON NEXT PAGE}

3. A specific and detailed statement of the written law, rule, policy and/or procedure violated. What action or conduct constituted the violation (NAC 284.678). *If you choose to attach pages to describe, please indicate the number of pages attached;* _____

4. Proposed solution to the Grievance.

5. Employee's Signature and date filed with the *next highest level in the chain of command*;

Employee Name (Please Print)

Employee Signature

Date

Next highest level in the chain of command acknowledgement;

Supervisor's Name (Please Print)

Supervisor's Signature

Date Received