

PSU Noncontractual Grievance Process

**Appendix 1
Written Statement of Grievance**

Name _____

Department _____

Statement of unfair or inequitable treatment (describe and give date of act or omission):

Authorized representative (if any): _____

Grievant's signature: _____

Date of filing: _____

Submit to your Dean. Retain copy for your records.

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**Appendix 2
Request for Peer Hearing**

To: Chairperson of PSU Faculty Grievance Panel

From: (name) _____

I am not satisfied with the action of _____

With respect to my noncontractual grievance, filed on (date) _____

I hereby request a hearing. The following materials are enclosed to supplement the file:

Authorized representative (if any): _____

Grievant's signature: _____

Date of request: _____

Retain copy for your records.