

# Discrimination Grievance Checklist for Covington Independent Public Schools

The following checklist should be followed for the filing of a grievance alleging discrimination, using the Covington Independent Public Schools' discrimination/harassment grievance procedures. This checklist is provided to facilitate understanding of the grievance process.

## Informal Resolution

1. Discuss the grievance with immediate superior, with the purpose of resolving the issue. The principal is the student's immediate superior. An exception is that complaints of sexual harassment may be discussed with the directors of Personnel and Pupil Personnel or first-line superior or administrator who is not involved in the alleged harassment.
2. Expect a decision at the conclusion of this conference or a reasonable time thereafter.
3. Should the immediate superior's decision be unsatisfactory in resolving the issue, then, within five days of the informal decision, file a formal written complaint to:

Directors of Personnel or Pupil Personnel  
Covington Independent Public Schools  
25 East Seventh Street  
Covington, Kentucky 41011

Necessary forms for filing may be obtained from any Covington Independent Public School, from an immediate supervisor, or from the Directors of Personnel or Pupil Personnel.

## Formal Resolution

1. The grievant should submit a formal written complaint on the Discrimination Grievance Form.
2. The directors of Personnel and Pupil Personnel shall be empowered to investigate all written grievances and take all necessary action to avoid delay and maintain order in the proceedings.
3. The directors of Personnel and Pupil Personnel may hold a conference to resolve the issue(s).
4. The directors of Personnel and Pupil Personnel may interview witnesses as part of the fact-finding process.
5. The directors of Personnel and Pupil Personnel shall issue a decision within 30 days following the receipt of the formal written grievance unless the parties agree to extend that period.
6. The directors of Personnel and Pupil Personnel may facilitate the resolution of the grievance at any stage of the proceedings.
7. The directors of Personnel and Pupil Personnel will forward a copy of the written decision to the grievant and/or the representative.

## Appeal to the Director's of Personnel and Pupil Personnel's Decision

1. Should the directors of Personnel and Pupil Personnel decision be unsatisfactory in resolving the issue, then, within five days of receipt of the decision, the grievant may file a written appeal to the superintendent /designee. The appeal shall include the reasons for the appeal.
2. Within five days of receipt of appeal, the superintendent/designee shall render a decision. The superintendent's /designee's decision shall be final.

# Employee Discrimination Grievance

Mail or deliver this form to:

Directors of Personnel or Pupil Personnel  
Covington Independent Public Schools  
25 East Seventh Street  
Covington, Kentucky 41011

Case Number: \_\_\_\_\_

This form provides the opportunity for an employee to report alleged incidents of discrimination and to secure an equitable, prompt, and appropriate resolution.

<b>Employee Information</b>		Home Telephone No.: _____	
Name: _____			
(Last)	(First)	(Middle Initial)	
Home Address: _____			
(Number and Street)	(City)	(State)	(Zip)
Work Location: _____		Position Held: _____	
Work Address: _____			
(Number and Street)	(City)	(State)	(Zip)
Immediate Superior: _____		Work Telephone No.: _____	

## Type of Discrimination

*Please Check:*

Race     Sex     Age     Veteran     Disability     Religion     National Origin

Other: \_\_\_\_\_

## Statement of Grievance

Identify the harassment/discrimination that you allege has occurred. Be complete, and use full names/titles, dates, exact location(s), and specific occurrence(s), if appropriate.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date(s) discrimination occurred: \_\_\_\_\_

## What results are you seeking by filing this complaint?

Use additional sheet(s) if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you filed this complaint with any other governmental agency or pursuant to a labor-management agreement?     Yes     No

If yes, please specify: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Discrimination Grievance Appeal

Mail or deliver this form to:

Directors of Personnel or Pupil Personnel  
Covington Independent Public Schools  
25 East Seventh Street  
Covington, Kentucky 41011

Case Number: \_\_\_\_\_

This form provides the opportunity for a grievant to submit a written appeal to the superintendent / designee regarding any part of the findings and corrective actions rendered as a result of the investigation conducted by the Directors of Personnel or Pupil Personnel /designee.

<b>Employee Information</b>	Home Telephone No.: _____
Name: _____	_____
(Last) (First) (Middle Initial)	
Home Address: _____	_____
(Number and Street) (City) (State) (Zip)	
Home Telephone No.: _____	Cell Telephone No.: _____
Work Site: _____	Work Telephone No.: _____

## Statement of Appeal

Briefly state your reason(s) for submitting this appeal.

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## What results are you seeking by filing this complaint?

Use additional sheet(s) if necessary.

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Have you filed this complaint with any other governmental agency or pursuant to a labor-management agreement?  Yes  No

If yes, please specify: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_