**Grievance Meeting Record Form**

This form must be completed and signed by the relevant Line Manager/Councillor. The employee must also sign this form in acknowledgement that the details reflect the discussion.

The form is to be used to record details of formal grievance meetings only.

|  |  |
| --- | --- |
| Name of Employee |  |
| Job Title |  |
| Place of Work |  |
| Date of meeting |  |
| Stage of Procedure | ONE / TWO / APPEAL |
| Name of Councillorconducting meeting |  |
| Others present |  |

Was the employee advised of the right to be accompanied by an accredited Union representative or a colleague? **Yes No**

**Nature of grievance**

*Briefly, but precisely state the nature of the employee’s grievance:*

**Manager’s response**

*State the Manager’s response to the employee’s grievance*

Were matters resolved at the meeting? **Yes/No**

**Outcome of meeting**

|  |  |
| --- | --- |
| Manager’s Signature | Employee’s Signature |
| Date: | Date |

This form is to be retained for reference purposes. Copies must be sent to the employee, Chair and the HR Committee. Copies must not be retained on the personal files of staff.

*Additional Notes (Please use the reverse of this form or attach additional sheets as required)*

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| --- | --- | --- | --- | --- | --- |
| **Version** | **Author** | **Date** | **Changes** | **Status** | **Minute ref** |
| 1.0 | V Furniss |  |  | Draft |  |
| 1.0 | V Furniss | 20-06-2022 |  | Adopted | 22/1081 |
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