**PITTSBURG STATE UNIVERSITY**

**DISCRIMINATION GRIEVANCE HEARING REQUEST FORM**

A copy of the discrimination grievance hearing process can be found at:

<https://www.pittstate.edu/office/institutional-equity/grievance-procedures.html>

**GENERAL INFORMATION**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PSU ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Status: \_\_\_\_\_ Student \_\_\_\_\_ University Support Staff \_\_\_\_\_ Unclassified Staff

Department or Academic College \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Basis for Grievance (i.e. race, color, religion, sex, national origin, age, marital status, ancestry, genetic information or disability) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**NATURE OF COMPLAINT/GRIEVANCE** Indicate the exact nature of your grievance, giving specific information, exact description and dates of situations cited, names and positions of all persons involved. Use additional pages if necessary.

**SUMMARY OF EFFORTS TO SOLVE COMPLAINT/GRIEVANCE**  Describe the steps you have taken to resolve the complaint/grievance. Attach additional pages if necessary.

**CERTIFICATION AND REQUEST FOR HEARING** I certify that the information I have provided on this Discrimination Grievance Hearing Request Form (and attached documents is true and accurate to the best of my knowledge or belief. I hereby request a hearing before the Discrimination Grievance Committee.

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Signature of Grievant Date

**RECEIPT ACKNOWLEDGED**

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Director, Institutional Equity Date