| **Notification of Formal Grievance** |
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| You should only complete this form if the Informal Resolution process does not resolve your grievance, or the nature of your complaint is not suitable for Informal Resolution and it has been deemed appropriate to move straight to the formal stage of the Grievance Policy.  If your complaint has been considered at the informal stage, you must submit this form to the appropriate manager **within 10 working days** of being notified of the outcome. Where actions or recommendations have been made and more time is required to show whether they will be effective (in line with the timescales outlined in the informal outcome), you can agree to extend this timescale with the manager who dealt with your informal grievance.  **N.B if completing by hand please do so clearly and in black ink.** |

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| **Formal Grievance** | |
| **Your name:** |  |
| **Employee number:** |  |
| **Your job title:** |  |
| **Your service area:** |  |
| **Name of your Line Manager:** |  |
| **Date of Informal Resolution Meeting:** |  |
| **Name of Manager who conducted the Informal Resolution Meeting:** |  |
| **Date you were notified of the outcome of the Informal Resolution Stage:** |  |
| **Does your grievance relate to your line manager?** | Yes/No |
| **Representative Details** | |
| **Name of trade union representative** |  |
| **Contact details for trade union representative** |  |
| **Will they represent you at this stage (Formal Stage of the Grievance Policy)?** |  |
| **Summary of your complaint:** | |
| Clearly outline the details of your grievance or complaint (including any relevant facts, dates and names of individuals involved). Please enclose any relevant accompanying information or evidence with this form. | |
| **Please outline the actions taken so far to resolve your complaint:** | |
| This may include details of facilitation and/or support already provided under the Informal Resolution process such as counselling, mediation, training, and/or development. | |
| **Outcome/resolution requested:** | |
| Please outline your preferred outcome to your formal grievance and explain why you think this outcome will resolve the issue(s) that you have experienced/are experiencing. | |
| **Individuals involved in your complaint:** | |
| Please provide the names and contact details of any people involved in your complaint, including any witnesses. | |

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| **Declaration:** | |
| I confirm that the above statements are true to the best of my knowledge, information, and belief. I understand that making any vexatious or malicious allegations may result in disciplinary action being taken against me by the Council. Please note that in the most serious cases, making false, vexatious, or malicious allegations can be treated as potential gross misconduct. | |
| **Form completed by:** |  |
| **Signature (or electronically signed):** |  |
| **Date:** |  |
| **Your email address:** |  |
| **For completion by Council:** | |
| **Date form received:** |  |
| **Name of recipient and job role:** |  |
| **Date recorded on Halo** |  |
| **Signature (or electronically signed):** |  |