This checklist is provided to assist supervisors in responding to a grievance and must be completed by the supervisor responding to the grievance. Grievances are appeals concerning the **employee’s wages, hours of work, or conditions of work including disciplinary actions and terminations.**

Since this checklist can be used for all types of grievances, certain questions on the checklist might not be applicable to the particular grievance filed. In these instances, “N/A” can be entered as a response to the checklist question. In all other cases, a response must be entered for the checklist question. You may contact Human Resources regarding questions concerning the checklist or grievance process.

|  |
| --- |
| 1. Was the grievance filed within the deadline required by policy in [UPPS 04.04.41](http://policies.txstate.edu/university-policies/04-04-41.html)?
 |
| Yes [ ]  No [ ]  |
| 1. Have you thoroughly reviewed [UPPS 04.04.40](http://policies.txstate.edu/university-policies/04-04-40.html) regarding the disciplinary action which is the basis of the grievance?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| 1. Have you considered addressing the problem through contacting Human Resources about [Mediation Services](http://www.hr.txstate.edu/mediation.html)?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| 1. Have you thoroughly investigated and gathered documented facts about the issue raised by the employee?
 |
| * 1. Did you talk with everyone who has first- hand information?

Yes [ ]  No [ ]  NA [ ] * 1. Did you provide the employee with a chance to tell his or her side of the story?

Yes [ ]  No [ ]  NA [ ] * 1. Did the employee’s version of events differ from your own or other witnesses?

 Yes [ ]  No [ ]  NA [ ]  |
| 1. Are you handling the incident as privately and confidentially as possible (i.e. how do you know this)?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| 1. Does the employee understand the pertinent policy and/or office rules (how do you know this)?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| 1. Are the office rules/processes/procedures published?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| Does each employee have a copy? Yes [ ]  No [ ]  NA [ ]  |
| 1. Have the rules been communicated clearly to all employees?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| If so, When?  |  | How? |  |
| 1. How long have the rules been in effect?
 |  |
| 1. Have the rules been consistently enforced?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| * 1. What has been done in similar cases?
 |
| b. When others violated the rule, did you take the same action? |
| Yes [ ]  No [ ]  NA [ ]  |
|  If not, what did you do different? Why?  |
| 1. Does the employee feel they are being singled out (how do you know this)?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| 1. Were any previous warnings documented?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| If so, when? |  | For what purpose? |  |
| 1. What previous corrective action was taken with the employee?
 |
| 1. Has the employee complained of harassment or unfair/unequal treatment?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| If so, when? |  | For what reason? |  |
| 1. Has the employee applied for or recently returned from FMLA or military leave?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| If so, when? |  |
| 1. Has the employee recently complained of departmental/university wrong doing or a safety issue?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| If so, what? |  | When? |  |
| 1. Have any verbal or written promises of continued employment or promotion been given to the employee by anyone?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| 1. Were any requested accommodations denied to the employee?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| 1. Have other employees been terminated or disciplined for a similar offense or for similar poor performance?
 |
| Yes [ ]  No [ ]  NA [ ]  |
| 1. Is there any evidence of discrimination based on age, sex, race, religion, national origin, disability or any other legally protected characteristic?
 |
| Yes [ ]  No [ ]  NA [ ]  |