

## Complaint/Intake Form – Internal Confidential Document – Please Print

Today's Date:	Steward / Staff Conducting Intake:
---------------	------------------------------------

### A. Background Information

Full Name:	Job Title:
Agency & Work Unit/Address:	Hire Date:
Work Days/Hours:	Work Phone No.:
Home Address:	
Home/Cell Phone: C: H:	Work/Personal E-mail address: P: W:

**B. Complaint:** Briefly state the facts and circumstances surrounding your complaint. The statement should include the following: (1) A description of the act or incident, (2) Why it happened: personal bias, union activity, alleged poor performance or conduct, (3) name, job, title, grade, work unit, etc. of each witness who know the facts about the complaint, (4) Why you consider it a valid complaint – give section number of contract, regulation, law, etc., violated. Be brief, but include all the facts. **Use additional sheets if necessary.**

--

**C. Remedy Sought** (state what action you think management should take to resolve the complaint)

--

**C. Timelines for Filing Grievance:**

<ol style="list-style-type: none"><li>1. Deadline response to discipline due/other deadline: _____</li><li>2. Deadline to file 1<sup>st</sup> step grievance _____, response due: _____</li><li>3. Deadline to file 2<sup>nd</sup> step grievance _____, response due: _____</li><li>4. Deadline to file 3<sup>rd</sup> step grievance _____, response due: _____</li><li>5. Deadline to file arbitration: _____</li></ol>
--

(OVER)

D. Has employee talked with supervisor about this?: ( ) Yes ( ) No

<b>Name of supervisor:</b>	<b>Phone:</b>
<b>If yes, state briefly what he/she said:</b>	

**E. Has employee spoken with any other management official(s) about this? : ( ) Yes ( ) No**

<b>Name of supervisor's manager:</b>	<b>Phone:</b>
<b>If yes, state briefly what he/she said:</b>	

**F. Has employee submitted complaint in writing to management? : ( ) Yes ( ) No**

If yes, attach a copy of your submission and any reply you received.

**G. Other**

<b>How long has the employee been employed with State of NM and/or this agency?:</b>
<b>Has the employee received any other disciplinary actions during his/her tenure?</b>
<b>When did the employee have his/her last evaluation and how was he/she rated?</b>
<b>What are the employee's leave balances on his/her last time and earnings statement?</b>  <b>Annual leave balance:</b>  <b>Sick leave balance:</b>
<b>Additional notes:</b>