EXHIBIT C

LEVEL TWO APPEAL NOTICE

To appeal a Level One decision, or the lack of a timely response after a Level One conference, please fill out this form completely and submit it by hand delivery, electronic communication, or U.S. mail to the Superintendent or designee within the time established in DGBA(LOCAL). Appeals will be heard in accordance with DGBA(LEGAL) and (LOCAL) or any exceptions outlined therein.

releptione number.	
E-mail address:	
Position:	Campus/Department:
senting you. If the perso	ed in presenting your appeal, please identify the person repre- on representing you will participate by telephone conference call, elow. The District will inform you if the equipment necessary for on is unavailable.
☐ Representation will be by telephone conference call.	
	designate a representative who will be participating in person or lvance notice of at least three days, or the District may reschedearing to a later date.
Name:	
Address:	
Telephone number:	
E-mail address:	
E-mail address: Who held the Level One	
E-mail address: Who held the Level One Date of conference:	e conference?

PERSONNEL-MANAGEMENT RELATIONS EMPLOYEE COMPLAINTS/GRIEVANCES

DGBA (EXHIBIT)

- 7. Attach a copy of your original Level One complaint and any documentation submitted at Level One.
- 8. Attach a copy of the Level One response being appealed, if applicable.

Employee signature:	
Signature of employee's representative:	
Date of filing:	

Complainant, please note:

A complaint or appeal form that is incomplete in any material way may be dismissed but may be refiled with all the required information if the refiling is within the designated time for filing a complaint or appeal.

Please keep a copy of the completed form and any supporting documentation for your records.

DATE ISSUED: 1/8/2015 UPDATE 48

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