

**CUBA INDEPENDENT SCHOOL DISTRICT**



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**CONFLICT RESOLUTION PROCESS/PROCEDURE**  
**FORMAL GRIEVANCE/CONFLICT RESOLUTION**  
(See attached Process & Procedures)

Grievant: \_\_\_\_\_

Date of formal grievance presentation: \_\_\_\_\_

School: \_\_\_\_\_

Immediate supervisor: \_\_\_\_\_

Assignment: \_\_\_\_\_

Policy or regulation alleged to have been violated: \_\_\_\_\_

**Statement of grievance:**

**Action requested:**

\_\_\_\_\_  
Signature of grievant

**PO Box 70, #50 County Rd 13, Cuba, NM 87013, Phone: 575-289-3211, Fax: 575 289-3314**

*Cuba Independent School District does not discriminate on the basis of race, religion, color, national origin or ancestry, sex, gender identity, sexual orientation, age, marital or veteran status or disability in any educational programs, activities or employment. Cuba Independent School District also prohibits the use of racial, ethnic, and/or sexual slurs, including sexual harassment. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in a school meeting or hearing, or if you wish to receive assistance or information regarding student grievances, language translations of District policy, Section 504 or Title IX, please contact the Superintendent's Office at least one week prior to the meeting or as soon as possible.*