Employee Appeal/Grievance Form

Date: _____

I was Dismissed			
I was Suspended			
I was Demoted I do not agree with my service rating I received a letter of reprimand/letter of warning I have a problem with my supervisor or fellow employee			
		I need to talk to someone about t	:he following:
Other:			
Print Name	Job Title		
Cinn at ma	Who we do you would		
Signature	Where do you work?		
Email Address			
Phone Number			

Return to Mobile County Personnel at 1809 Government Street, Mobile, Alabama or mcpb@personnelboard.org.

Address