

Robbinsville Board of Education

155 Robbinsville Edinburg Road

Robbinsville, NJ 08691

Phone: 609-632-0910 (2201) / Fax: 609-371-7964

AFFIRMATIVE ACTION GRIEVANCE PROCEDURE

In keeping with federal/state antidiscrimination legislation, the Robbinsville Board of Education has adopted and hereby publishes the Affirmative Action Grievance Procedure for the resolution of student, employee, and parent complaints.

PURPOSE

To provide students, employees, and parents a procedure by which they can seek a remedy for alleged violations related to discrimination on the basis of race, color, creed, religion, affectional or sexual orientation, sex, ancestry, national origin, or socioeconomic status.

DEFINITIONS

Grievance: A formal written complaint.

Grievant: Any student, employee, or parent aggrieved by a decision or condition falling under the guidelines of federal and/or state anti-discrimination laws.

Affirmative Action Officer: The district employee designated to coordinate efforts with anti-discrimination legislation and charged with the responsibility of investigating complaints.

PROCEDURE:

Step #1: The grievant must present the complaint in written form to the responsible person designated as the Affirmative Action Officer. (Use Grievance Report - Form A)

Step #2: The Affirmative Action Officer has five working days in which to investigate and respond to the grievant. (Affirmative Action Officer is to use the space provided on Grievance Report - Form A)

Step #3: If not satisfied, the grievant may appeal within ten-working days to the Superintendent or designee (not Affirmative Action Officer). (Use Appeal - Form B)

Step #4: Response by the Superintendent or designee must be given within five working days. (Superintendent to use space provided for on Appeal - Form B)

Step #5: If the grievant is not satisfied at this level, an appeal may be made within ten working days to the Board of Education which will hear the complaint at the next regular meeting or within thirty calendar days. (Use Appeal - Form C) Local Board hearing shall be conducted so as to accord due process to all parties involved in the complaint such as written notice of hearing dates, right to counsel, right to present witnesses, right to cross-examine and to present written statement. The decision of the Board shall be by a majority of the members at a meeting which shall be public.

Step #6: The Robbinsville Board of Education shall respond to the grievant within thirty calendar days. (Use space provided for an Appeal - Form C)

Step #7: If the grievant is not satisfied with Board's decision, the grievant can have it referred to the County Superintendent of Schools.

Step #8: The grievant maintains the right to by-pass the grievance procedure and submit the complaint directly to any or all of the following agencies:

1. The Commissioner of Education

Bureau of Controversies and Disputes
New Jersey Department of Education
PO Box 500
Trenton, New Jersey 08625
Phone: (609) 292-5705

2. Equal Employment Opportunity Commission Newark District Office

1 Newark Center, 21st Floor
Newark, New Jersey 07102
Phone: 800-669-4000 or 973-645-6383

3. U.S. Office for Civil Rights

U.S. Department of Education
32 Old Slip, 26th Floor
New York, NY 10005-2500
Phone 646-428-3900 or TDD: 877-521-2172
Email: OCR.NewYork@ed.gov

4. New Jersey Division on Civil Rights

140 East Front Street, 6th Floor
PO Box 090
Trenton, NJ 08625-0090
Phone: 609-292-4605 or TDD 609-292-1785

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**AFFIRMATIVE ACTION GRIEVANCE REPORT
FORM A**

STEP #1

FROM: _____, Grievant

TO: _____, Affirmative Action Officer

DATE: _____

DESCRIPTION OF HAPPENING:

Signature, Grievant

(This portion to be completed by Affirmative Action Officer ONLY)

STEP #2

Grievance Number _____

TO: _____, Grievant

FROM: _____, Affirmative Action Officer

DATE: _____

RESPONSE TO GRIEVANT:

Signature, Affirmative Action Officer

Date Grievance Received

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APPEAL - FORM B

STEP #3

Grievance Number: _____

FROM: _____, Grievant

TO: _____, Affirmative Action Officer

DATE: _____

"Grievance Report Form A is hereby attached for APPEAL to the Superintendent."

Signature

(This portion to be completed by Affirmative Action Officer ONLY)

STEP #4

Grievance Number: _____

TO: _____, Grievant

FROM: _____, Affirmative Action Officer

DATE: _____

RESPONSE TO GRIEVANT' S APPEAL:

Signature, Affirmative Action Officer

Date Appeal Received

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SECOND APPEAL - FORM C

STEP #5

Grievance Number: _____

FROM: _____, Grievant

TO: _____, Affirmative Action Officer

DATE: _____

The attached Grievance Forms A and B, are hereby submitted to the Robbinsville Board of Education for review pertaining to my complaint.

Signature, Grievant

(This portion to be completed by Affirmative Action Officer ONLY)

STEP #6

Grievance Number: _____

TO: _____, Grievant

FROM: _____, Affirmative Action Officer

DATE: _____

RESPONSE TO SECOND APPEAL:

Signature, Affirmative Action Officer

Date Appeal Received