



Employee Grievance Committee

South Atlantic Conference of Seventh-day Adventists

Fillable Appeal Application and Intake Form

UNDERSTAND YOUR REQUEST

You are requesting a hearing before the SAC Employee Grievance Committee (EGC) to seek resolution of your case that has gone through the steps required by the SAC Dispute and Conflict Resolution Protocol for Conference Employees and Workplaces. The Certification of Compliance Form must be signed and emailed to the EGC Chairperson before a hearing will be granted.

PLEASE PROVIDE REQUESTED INFORMATION BELOW

LAST NAME	FIRST NAME	TITLE OR POSITION	TODAY'S DATE
EMAIL ADDRESS:		TRANSLATION NEEDED?	<input type="radio"/> No <input type="radio"/> Yes
CURRENT PLACE/LOCATION OF EMPLOYMENT			
BRIEFLY STATE YOUR APPEAL Briefly state the concern or problem to be resolved. Kindly remember that this application is an appeal of a previous decision by HR or ADCOM			
YOUR REQUEST AND COMMITMENT: I hereby request a hearing before the EGC to appeal the decision previously made in my case as I have described above. I will participate in this process in good faith with a desire to resolve the issue or concern amicably with my peer(s), coworker(s), and fellow Christian laborers. Any testimony or evidence I give will be based on demonstrable facts that comply with US labor laws, NAD Working Policy, the Southern Union Conference Education Code Book if applicable, and the South Atlantic Conference Employee Handbook. I understand and accept the promise by the EGC that my case will be treated with the strictest confidentiality. I am willing to sign a Non-Disclosure Agreement as have the members of the EGC.			
Signature:		Phone Number:	