BUENA REGIONAL SCHOOL DISTRICT AFFIRMATIVE ACTION GRIEVANCE PROCEDURE

In keeping with federal/state antidiscrimination legislation, the Board of Education has adopted and hereby publishes the Grievance Procedure provided 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.

DEFINITION:

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

antidiscrimination 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 Buena Regional 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:
 - 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
 - Equal Employment Opportunity
 Commission Newark District Office
 1 Newark Center, 21st Floor
 Newark, New Jersey 07102
 Phone: 800-669-4000 or 973-645-6383
 - U.S. Office for Civil Rights
 U.S. Department of Education
 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 P0 Box 090 Trenton, NJ 08625-0090 Phone: 609-292-4605 or TDD 609-292-1785

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GRIEVANCE REPORT - FORM A

STEP#1	
FROM:	, Grievant
TO:	, Affirmative Action Officer
DATE:	
DESCRIPTION OF HAPPENING:	
	(Signature)
(This Portion to be used by Affin	
STEP#2	Grievance Number
TO:	, Grievant
FROM:	, Affirmative Action Officer
DATE:	
RESPONSE TO GRIEVANT:	
(Date Grievance Received)	(Affirmative Action Officer)

APPEAL - FORM B

STEP #3

OIDI "J	Grievance Number	
	FROM:	, Grievant
	TO:	, AAO
	DATE:	
	"Grievance Report Form A is	hereby attached for APPEAL to the Superintendent."
	(Signature)	
STEP #4	(This Portion to be used	by Affirmative Action Officer ONLY)
SILI #4		Grievance Number
	TO:	,Grievant
	FROM:	, AAO
	DATE:	
RESPON	SE TO GRIEVANT' S APPEA	AL:
	(Date Appeal Received)	(Affirmative Action Officer)

SECOND APPEAL - FORM C

51EP #5	Grievance Number	
FROM:	, Grievant	
TO:	, AAO	
DATE:		
The attached Grievance Forms A a Education's review pertaining to r	and B, are hereby submitted for the Board of my complaint.	
(Signature)		
STEP #6		
	Grievance Number	
ТО:	, Grievant	
FROM:		
DATE:		
RESPONSE TO SECOND APPEAL:	-	
(Date Appeal Received)	(Affirmative Action Officer)	