# MiraCosta College Grievance Form: LEVEL 2 RESPONSE

|  |
| --- |
| Grievant Information |
|

|  |  |  |
| --- | --- | --- |
| Name: |  |  |

 |
|  |

|  |
| --- |
| District Administrator Response |
| **[ ]  Grievance Resolved** **[ ]  Grievance Denied** **[ ]  Other****Provide a clear, concise statement as to the reason(s) for the decision:**      |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Administrator Name |  | Signature |  | Date |

Forward this form to the grievant and Faculty Assembly ombudsperson and/or authorized FA representative.