

Performance Appraisal Grievance Report

Employee Information

Employee Name:

Employee ID:

Department:

Designation:

Appraisal Period:

Grievance Details

Date of Appraisal:

Summary of Grievance:

Detailed Description:

Supporting Documents (if any)

List of Attached Documents:

Actions Requested

What Resolution is Sought?**Employee Declaration**

I hereby declare that the information provided above is accurate to the best of my knowledge.

Employee Signature:**Date:****HR/Management Use Only**

Received By	Date Received	Action Taken	Date of Resolution

Remarks: