

Performance Appraisal Dispute Grievance Form

Employee Name

Employee ID

Department

Position

Appraisal Period

e.g. Jan 2023 - Dec 2023

Date Submitted

Description of Dispute/Grievance

Describe the specific grievance or disputed appraisal area...

Desired Outcome/Solution

State the resolution you seek...

Supporting Evidence/Comments (if any)

Attach/write any supporting documents, facts, or comments...

Employee Signature

Signature Date

For HR/Reviewer use only.

Reviewer Comments/Decision

