

Chapter 7 Part 3 Form 4

**Shelton Housing Authority
306 C Street, PO Box 73
Shelton, NE 68876**

NOTICE OF GRIEVANCE PANEL HEARING

Date: _____

Dear _____ :

You have requested a Grievance Panel Hearing on the disposition of your grievance and/or complaint.

This Grievance Panel Hearing is scheduled for the ___ day of _____, 20 __, at _____, at the Shelton Housing Authority Community Room. You are free to bring any information, documents, or witnesses to support your case, and you may bring an attorney or other representative.

If you fail to notify the Executive Director and/or the Secretary in writing of any request to postpone the Grievance Panel Hearing within 24 hours of the time of the scheduled hearing, the Grievance Panel may decide to postpone the hearing for not to exceed five (5) calendar days or determine that the party has waived their rights to the Grievance Panel Hearing.

The Shelton Housing Authority has already provided you with a copy of the established Grievance Procedures. If you need another copy, please go to Shelton Housing Authority Office.

Sincerely,