



State of Arkansas Grievance Form - Request for a Whistle-blower Hearing

This form is used to request a Whistle-blower Hearing pursuant to A.C.A § 21-1-702 and the [State of Arkansas Grievance Policy and Procedure](#). This form must be completed and submitted to your Department's Grievance Officer to initiate the process. Supporting documentation must be submitted along with this form. Contact your human resources office for more information regarding your Department's grievance policy.

Department:

Division, if applicable:

Employee's Name:

Phone Number:

Job Title:

Grade:

Email Address:

Home Address:

Supervisor's Name:

In order for a request to be granted, the following information must be provided:

1. What was the date of the termination?
2. I am alleging my termination was an adverse action for exercising one of the following protected activities:

Communicating in good faith to an appropriate authority the existence of waste of public funds, property, or manpower, including federal funds, property, or manpower administered or controlled by a public employer.

Communicating in good faith to an appropriate authority a violation of suspected violation of a law or rule adopted under the law of this state or a political subdivision of the state.

Participating or giving information in an investigation, hearing, court proceeding, legislative or other inquiry, or in any form of administrative review.

Objecting to or refusing to carry out a directive that the employee reasonably believes violates a law or rule adopted under the authority of the laws of the state or a political subdivision of the state.

Reporting a loss of public funds under § 25-1-124.

You must submit evidence with this request that sufficiently documents the protected activity you engaged in prior to being terminated. Evidence that is confidential will remain confidential when submitted in support of the request for a Whistle-blower Hearing.

Employee's Signature

Date