

## **Dixon County 4-H Grievance Policy**

Established 2019

### **Purpose**

The Dixon County Grievance process provides a vehicle to respond to 4-H member's concerns relating to Dixon County 4-H rules/decisions. This process provides a means for members/parents/guardians' concerns to be heard and cannot be resolved via reasonable conversation.

### **What May be Appealed?**

All 4-H Youth & Development issues may be appealed with the exception of complaints against 4-H members (or their families), 4-H volunteers, judging officials for competitive events, or Nebraska Extension Staff. This may include 4-H participation, activities/programs, 4-H policy and rule violations. The individual completing the grievance form is responsible for documenting the burden of proof with the incident.

### **Who May Appeal?**

Dixon County 4-H members and parents/guardians have the right to file an appeal.

### **Timeframe**

- Dixon County Fair and Contests (Speech, Music, Presentation, & Favorite Foods, etc.)- The grievance form must be completed and signed with filing fee (\$50) within 30 minutes after judging is completed and returned to Nebraska Extension in Dixon County Staff (4-H Educator). Filing fee will be refunded upon positive settlement.
- Non-Traditional 4-H & Youth Development Events-The grievance form must be completed and signed with filing fee (\$50) within 14 days from the incident and returned to Nebraska Extension in Dixon County Staff (4-H Educator). Filing fee will be refunded upon positive settlement.

### **Membership on the Grievance Committee**

Will be heard by an unbiased, representative sub-committee (see below). To maintain the confidentiality of the parties involved, the grievance meetings will be closed to the public. Only the individuals who have filed the grievance, the members of the grievance committee, and the Nebraska Extension Educators will be present.

#### **A. Dixon County Fair**

- President of the Dixon County 4-H Council
- Superintendent of the 4-H Department
- Two Members at Large from the Dixon County 4-H Council (will need to be identified at January meeting)
- Fair Board Member
- The committee will act within 24 hours of receiving the written grievance form. If a decision cannot be reached, the Dixon County Extension Board will hear the grievance and make a decision at their next Extension Board Meeting (Final Level).
- The Nebraska Extension in Dixon County 4-H Educator shall convene the group.

#### **B. Non-Traditional 4-H & Youth Development Events**

- President of the Dixon County 4-H Council
- Two Members at Large from the Dixon County 4-H Council (will need to be identified at January meeting)
- President of the Dixon County Extension Board
- 4-H volunteer knowledgeable in the subject matter (project) of concern
- The committee will act within 7 days of receiving the written grievance form. If a decision cannot be reached, the Dixon County Extension Board will hear the grievance and make a decision at their next Extension Board Meeting (Final Level).
- The Nebraska Extension in Dixon County 4-H Educator shall convene the group.



**EXTENSION**

**Dixon County 4-H Grievance Form**

*Est. 3/2019*

**SECTION I: 4-H Member**

Name: \_\_\_\_\_ Date of Incident: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ 4-H Club: \_\_\_\_\_

4-H Project Area: \_\_\_\_\_ Number of Years in Project: \_\_\_\_\_

**SECTION II: Information Regarding Incident**

Date and Time of Incident: \_\_\_\_\_ Location: \_\_\_\_\_

Name of 4-H Activity: \_\_\_\_\_

Adult 4-H Event Coordinator/Supervisor: \_\_\_\_\_

Was anyone physically injured during incident? Yes No

If YES was a 4-H Accident Claim Form completed? Yes No

Was an Incident Report Form completed? Yes No

Individuals involved in incident. (For each, circle Member/Volunteer or Other Person)

\_\_\_\_\_ Member Volunteer Other

\_\_\_\_\_ Member Volunteer Other

\_\_\_\_\_ Member Volunteer Other

Were there other witnesses to this incident? Yes No  
(If YES please list their names below.)

Individuals who witnessed the incident. (For each, circle Member/Volunteer or Other Person)

\_\_\_\_\_ Member Volunteer Other

\_\_\_\_\_ Member Volunteer Other



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\_\_\_\_\_ Member    Volunteer    Other

**SECTION III: Narrative** Please explain in detail what happened in the space below. Use additional paper if necessary.

**SECTION IV: Recommendation for Correction** Please explain possible solutions to solve the problem.

**I certify that the information contained on this Dixon County 4-H Grievance Form is true to the best of my knowledge.**

\_\_\_\_\_  
**4-Her Signature**

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**

Office Use Only		
Filing fee paid <input type="checkbox"/>	Grievance was: Accepted <input type="checkbox"/>	Denied <input type="checkbox"/>

\_\_\_\_\_  
**Chair of Grievance Committee Signature**

\_\_\_\_\_  
**Date**