

**Georgia Department of Human Resources
Notification of Grievance: State Mediation Committee**

This form serves as the official notification of your STEP THREE grievance to the State Mediation Committee. It should be accompanied by a copy of Form 80 and Form 82, the local county and State Division Director responses and any other letter or documentation that you may wish to provide for review. Mail to : State Mediation Committee, Office of the Child Advocate, State of Georgia, 3330 Northside Drive, Suite 100, Macon, GA 31210.

I. BASIS FOR STEP THREE GRIEVANCE TO THE STATE MEDIATION COMMITTEE

Grievance submitted to the State Division Director was not resolved in ten (10) working days.

Grievance submitted to the State Division Director was not resolved in a timely manner.

Grievance submitted to the State Division Director was not resolved to my satisfaction.

II. PLEASE SUMMARIZE YOUR GRIEVANCE AND RESULT OF STEP TWO EFFORTS

Attach any supporting documentation to this form.

I agree to receive notices via electronic mail.

I do not agree to receive notices via electronic mail.

Signature

Date