

**Form DCE-G4**

**DIVISION OF CONTINUING EDUCATION**  
**STEP ONE DECISION**

For the Board: \_\_\_\_\_

Year: \_\_\_\_\_

Board No.: \_\_\_\_\_

GRIEVANT: \_\_\_\_\_

COLLEGE: \_\_\_\_\_

After reviewing the complaint and supporting evidence attached thereto and after meeting with the grievant for the purpose of resolving the grievance on \_\_\_\_\_, 20\_\_\_\_, I make the following decision:

1. Statement of Facts:

2. Issue(s) presented by the grievant, including specific contract provisions alleged to have been breached:

3. Decision and Reason(s) for Decision:

4. Remedy offered, if appropriate:

\_\_\_\_\_

\_\_\_\_\_  
Immediate Supervisor

\_\_\_\_\_  
Date (must be issued within fifteen  
(15) days after receipt of grievance)

cc: Joseph Rizzo, MCCC DCE Grievance Coordinator, 44 Governor Dinsmore Road, Windham, NH, 03087  
Miles B. Stern, MTA Consultant for Higher Education, MCCC/MTA, 20 Ashburton Place, Boston, MA 02108.  
President of the College  
College Human Resources Office

**N.B. You have the right to appeal this Decision to Step Two by filing an appeal on Form DCE-G5 within twenty (20) days after receipt of this decision.**