

# Grievance Appeal Letter

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

[Recipient's Name]  
[Recipient's Title/Department]  
[Company/Organization Name]  
[Company Address]  
[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally appeal the decision made regarding my grievance submitted on [original grievance date]. The outcome of that grievance was communicated to me on [date of outcome communication], and I respectfully disagree with the findings for the reasons outlined below:

- [Reason 1]
- [Reason 2]
- [Reason 3]

I believe that [briefly explain your perspective or provide supporting evidence].

I kindly request a reconsideration of the earlier decision and a meeting to discuss my appeal further. Thank you for your attention to this matter.

Sincerely,  
[Your Name]