

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

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

Dear [Recipient's Name],

Subject: Appeal of Grievance Decision

I am writing to formally appeal the decision regarding my grievance submitted on [Original Grievance Date] concerning [Brief Description of Grievance]. After careful consideration of the response provided on [Date of Response], I believe that the decision warrants further review for the following reasons:

1. [Reason 1: Briefly describe your first reason for the appeal]
2. [Reason 2: Briefly describe your second reason for the appeal]
3. [Reason 3: Briefly describe your third reason for the appeal]

I respectfully request that you reconsider the decision and review the enclosed supporting documents, which further substantiate my appeal.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]  
[Your Job Title/Position, if applicable]