

APPEAL OF MINOR DISCIPLINARY ACTION

NEW JERSEY DEPARTMENT OF PERSONNEL — STATE SERVICE

INSTRUCTIONS:

Employer: Provide this form to all permanent employees or employees serving in a working test period with the issuance of any notice of suspension or fine of five days or less or an official written reprimand.

Employee: To appeal this charge, complete Part I and submit this form to your appointing authority / designee within five calendar days of receipt of this form or within such time frame as provided in your union contract.

PART I — Employee Appeal to Management:

NAME OF EMPLOYEE		MAILING ADDRESS	
Social Security Number:			
DEPARTMENT	DIVISION, INSTITUTION OR AGENCY	TITLE OF YOUR POSITION	
CHARGES APPEALED		REPRESENTATION (check one)	
		<input type="checkbox"/> I will represent myself. <input type="checkbox"/> My representative will be:	
PENALTY RECOMMENDED		Name of Representative _____	
		Title/Union _____	
EMPLOYEE SIGNATURE:		DATE:	

Employee Do Not Write in Part II — For Management Decision

Part II — Management Decision on Employee's Appeal:

Appointing Authority/ Designee Signature:	Date:	MANAGEMENT <input type="checkbox"/> Check here if decision is attached.
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Section Below To Be Completed By Employee After Management Decision

Part III — Further Appeal: If the charges have been upheld by Management in Part II, you have a further right to appeal. Please check block A, B or C below to indicate your decision with respect to further appeal and **return this form to the appointing authority/designee**. Please note, if you are a permanent employee in a Law Enforcement Unit and have selected option B, submit this form to your union president.

- A. I will not appeal the management decision.
- B. I wish to appeal this minor discipline under the provisions of my union contract. This option is available only to permanent employees covered by a union contract who receive a fine or suspension of five days or less. Check union contract for time period to file appeal.
- C. I request a review of my appeal by the New Jersey Department of Personnel. This option is available to permanent employees or employees serving a working test period who receive a fine or suspension of five days or less or an official written reprimand. This appeal must be filed within 20 calendar days of receipt of this form and present an issue of general applicability concerning a law, rule, regulation or policy.

EMPLOYEE SIGNATURE: **DATE:**