

Career Service Review Office

Grievance Form

I. IDENTIFICATION OF EMPLOYEE

Name:

Address:

Phone:

Email (*Required*):

State Employee ID Number:

Employer Agency/Division:

Employee Signature:

Date:

II. GRIEVANCE:

I am grieving a decision regarding:

- a dismissal
- a demotion
- a suspension
- a reduction in force
- a dispute concerning abandonment of position
- a wage grievance (If the employee is not placed within the salary range of the employees current position)
- equitable administration of benefits listed in *Utah Code § 67-19a-202(1)(h)*
- retaliatory action prohibited by the Utah Protection of Public Employees Act

Or I am requesting a review of:

- the findings of an abusive conduct investigation conducted by the Department of Human Resource Management (DHRM)

III. STATEMENT OF GRIEVANCE:

III. REMEDY or RELIEF SOUGHT:

When filing a grievance, employees are required by statute to provide a copy to the Career Service Review Office (CSRO). The failure to timely comply may result in default. A copy should also be sent to your departmental Human Resource Director.

E-File:

csro@utah.gov

Employees must keep the CSRO apprised of any email, mailing, address or telephone number changes at all times during the adjudication of this matter.

NOTE:

*This form should not be used for classification grievances. Classification grievances must be filed with the Department of Human Resource Management (DHRM).

* You will receive all communications by email **ONLY** from the CSRO. Therefore, providing an email address is mandatory. If you do not have access to email, you must notify the CSRO in writing.