

Simple Steps on How to File a Major Disciplinary Appeal

You will need to complete the Major Disciplinary Appeal Form (see attached).

- ⑤ **Box #1** - Fill in all your contact information (name address, daytime phone, email address).
- ⑤ **Box #2** – Fill in the name of the representative on the form who is representing you. (either the union or law firm – if it is a law firm, fill out the Union Waiver Form – See Attached).
- ⑤ **Box #3** – Fill out your employer representative’s name and work address. Then give a copy of this Major Discipline Appeal Form to your Personnel Officer / Employer Representative.
- ⑤ **Box #4** – Write your signature in this spot and date it.
- ⑤ **Box #5** – Make copies of the (PNDA) Preliminary Disciplinary Action, (FNDA) Final Notice of Disciplinary Action, and include a check or money order for \$20.00 payable to the (NJCS) New Jersey Civil Service Commission.

Ensure that you submit the Major Appeal Form to the (CSC) Civil Service Commission within (20) twenty days from the date you received your (FNDA) Final Notice of Disciplinary Action. This cannot be emphasized enough! If you do not submit your appeal within a 20-day period (20 calendar days, not working days) your appeal will not be timely or accepted.

It is recommended that you go to the Post Office and submit the Major Appeal Form along with the PNDA and FNDA certified mail/return receipt or deliver it in person to the Civil Service Commission. If you deliver it in person, ensure that you obtain a date stamped or a copy of a receipt. This way you have the proof needed to ensure that it was timely within the 20-day timeframe. The Civil Service mailing address is as follows:

N.J. Civil Service Commission
Unit H.
P.O. Box 312
Trenton, NJ 08625

Please note that all copies of what is being sent to the Civil Service Commission should also be sent to the Trustees of Local 195, IFPTE at: 186 N. Main Street, Milltown, NJ 08850.

Thank you.

MAJOR DISCIPLINARY APPEAL FORM

New Jersey Civil Service Commission - Division of Appeals and Regulatory Affairs

Mail completed form to: Civil Service Commission, Unit H, P.O. Box 312, Trenton, NJ 08625-0312.

1. Your Name: _____
Address: _____

(City) (State) (Zip Code) Daytime Telephone: () _____
Email: _____

2. Will you be represented by a lawyer or union representative at the hearing? YES NO
If YES, complete Section 2.
Representative Name: _____
Union or Law Firm: _____
Address: _____

(City) (State) (Zip Code) Telephone: () _____
Email: _____

3. Give a copy of this form and attachments to your Personnel Officer/Employer Representative
Personnel Officer's/
Employer Representative's Name: _____
Address: _____

(City) (State) (Zip Code) Telephone: () _____
Email: (if known) _____

4. Your or your representative's signature

Date: _____

5. ATTACH the following to this form:
1. Preliminary Notice of Disciplinary Action.
2. Final Notice of Disciplinary Action.
3. Check or Money Order for \$20.00 payable to NJCSC.

NOTE: Your appeal will NOT be processed unless Sections 1-4 are completed and the three documents listed in Section 5 are included. Pursuant to P.L. 2010, c. 26, effective July 1, 2010 there is a \$20 fee for disciplinary appeals. Please include the required \$20 fee with your appeal. Payment must be made by check or money order only, payable to NJ CSC and sent to the CSC, Unit H, P.O. Box 312, Trenton, N.J. 08625. Persons receiving public assistance pursuant to P.L. 1947, c.156 (C.44:8-107 et seq.), P.L.1973, c. 256 (C.44:7-85 et seq.), or P.L.1997, c.38 (C.44:10-55 et seq.), and veterans as defined by N.J.S.A.11A:5-1 et seq. are exempt from this appeals fee. If you have been suspended or removed, you should seek alternate employment. In case your penalty is reduced, failure to seek alternate employment could reduce your back pay award.



Local 195
International Federation of Professional & Technical Engineers

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www.local195.org / Email: local195@local195.org
www.facebook.com/local195ifpte

"WAIVER OF UNION REPRESENTATION"

I, _____, do hereby relinquish my rights to union representation at my **Civil Service Commission** appeal to be held at the Office of Administrative Law, Docket No. _____ on _____. I have elected to represent myself or have my own personal representative at this hearing. And, I do hereby absolve my union, local 195, IFPTE, of all responsibility in this connection.

SIGNED: _____

DATE: _____

WITNESSED BY: _____