Memorandum

To: Job Evaluation Coordinator
   Compensation and Benefits

From: .................................................................

Re: Employee Request for Appeal

Department No:  Position No:

Department Name:

Incumbent’s Name:

Immediate Supervisor:

Immediate Supervisor:

Chair or Department Head:

Dean / Director:

I wish to Appeal the Evaluation of My Job Based on the Information Contained in the Most Recent Job Fact Sheet and I Have Provided Additional Information as Attached.

Incumbent’s Signature:

Incumbent must send copies to: Immediate Supervisor
                              Chair or Department Head
                              USW Local 4120

NB: This Appeal process applies to jobs that have been evaluated by the Joint Job Evaluation Committee.

Note to supervisor: You are required to acknowledge and respond to this appeal. If no comments are received from you regarding this appeal within 10 working days, we will assume you are in agreement with the additional information.
G. Appeals

(1) Grounds for Appeal

An appeal may be considered after the decision of the Joint Job Evaluation Committee has been communicated to the employee and supervisor. An appeal will be considered if your Job Fact Sheet contains wrong information or is missing information or needs clarification. This should be done in consultation with your supervisor as this information may have already been communicated to the Joint Job Evaluation Committee. Supervisors may also appeal decisions of the Joint Job Evaluation Committee. If the Supervisor initiated the process they will discuss the appeal and provide you with a copy. The Committee will consider only those appeals where there is consensus by the supervisor and the incumbent about the job. If you and your Supervisor cannot agree on the additional job content for appeal purposes, please call your USW Local 4120 Representative to discuss the situation.

(2) Procedure

Your appeal submission should consist of the original Job Fact Sheet, plus the additional information and any supporting documents. The additional information should refer to the Job Fact Sheet. For example, “Activity ‘A’ should have included.....”, “Activity ‘B’ means I do...... “, “The following missing information......” etc.. Indicate which factors you feel were inappropriately rated and provide your reasons. Your appeal should be clearly and concisely written. Do not submit a new rewritten Job Fact Sheet.

Your appeal should be sent to the Job Evaluation Coordinator within ten (10) working days but not exceeding fifteen (15) working days of when you would have reasonably been expected to receive the decision of the Joint Job Evaluation Committee. You will also send a copy of your appeal to USW Local 4120 and to your supervisor at the same time. Within ten (10) working days of when it can be reasonably expected that the supervisor has received the appeal, he/she must send comments on your appeal to the Job Evaluation Coordinator and to you.

Since appeals will be looked at by a larger Joint Job Evaluation Committee, it could take up to six months before a decision is communicated to you. However, Human Resources will confirm receipt of your appeal within ten (10) working days. The decisions made on appeals will be final and binding.

(3) Disputes

If your supervisor is not prepared to support your request for appeal, you may contact your USW Local 4120 Representative, Executive, or Human Resources Service Coordinator, to discuss the situation and any recourse available, up to and including filing a complaint as provided for under 8.04 of the Collective Agreement and Memorandum of Understanding #4.