**State/PEF**

**Article 17 Out-Of-Title Work Grievance Form**

*A grievance alleging out-of-title work is filed directly at Step 2. This grievance form may be completed by the grievant and/or grievant’s representative. All grievances, decisions, and appeals must be served in person or by certified mail, return receipt requested.*

Grievance Submitted By: [ ]  Individual(s) named below

 [ ]  PEF regarding the individual(s) named below

Name(s):

Current Civil Service Title(s) *(Do not use “in-house” title)*:

Grade(s):

Department/Agency:

Facility and/or Work Location:

Shift:

Supervisor’s Name, Civil Service Title:

Supervisor’s Grade:

***Description of Alleged Out-of-Title Work***: *Please fill this section in as completely as possible*.

1. Specifically describe the alleged out-of-title tasks/duties you (or the individual(s) alleged to be working out-of-title) are performing with sufficient detail to provide a clear picture of the scope of those duties. Use a separate paragraph for each type of task/duty and estimate the percent of time each week spent on each task/duty. Include any/all supervisory tasks performed that are not appropriate to your current title.

*Classification Standards and Performance Evaluations may be attached, but are not a substitute for a description of the specific duties you are actually performing. Attach additional sheets if needed.*

|  |  |
| --- | --- |
| **Description of Task/Duties** | **% of time each week** |
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1. Date grieved duties began:       If ended, date grieved duties ended:
2. What Civil Service title do you think should perform these duties?       Grade:
3. Why are the grieved duties inappropriate for current Civil Service title?
4. Who assigned these duties? How were they assigned? If you have documentation, please attach.
5. If you know, what caused this assignment (e.g., sick leave, retirement, vacation, etc.)?
6. Identify the title/grade of the supervisor(s) reported to when performing the grieved duties:
7. Identify the title(s)/grade(s) of the subordinate staff who report to employee performing the grieved duties:

1. Attachments. Please attach documents that support the claim of out-of-title work. Check all that have been attached:

[ ] Agency/Facility (in-house) job duties [ ] Agency memoranda, emails regarding duties

[ ] Performance Evaluations [ ] Other (Describe)

 Aggrieved Employee/

Date Submitted:       Authorized Signature:

*The Agency-Level Grievance must be filed with the Agency Head or designee with a copy simultaneously filed with the Facility or Institution Head or designee. If the grievance is PEF-initiated, a copy shall also be simultaneously served on the employee performing the alleged out-of-title work.*

**Agency-Level Decision (Step 2)**

*The Agency-Level Decision shall be issued no later than 10 working days following receipt of this grievance.*

Date grievance was received (filing date):

Date Step 2 Decision was issued:

GOER File Number:

Agency Head/Designee:

**GOER Appeal (Step 3)**

*Appeals to Step 3 may be submitted by the President of PEF or authorized designee and must be submitted within 10 working days from the receipt of the Agency-Level (Step 2) Decision*.

Date of receipt of Step 2 Decision:

The Agency-Level Step 2 Decision is unsatisfactory.

Reason for disagreement with the Agency’s Step 2 Decision:

Date Submitted:

Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**GOER Decision (Step 3)**

Date Decision was issued:

Director of the GOER/Designee:

**GOER Appeal (Step 3 1/2)**

*Appeals to Step 3 ½ may be submitted only by the President of PEF or authorized designee when there are additional facts or the existence of a dispute of fact, and must be submitted within 30 calendar days from the date of the GOER (Step 3) Decision. The Step 3 ½ appeal shall include documentation to support the factual allegations.*

The Step 3 Decision is unsatisfactory.

Additional facts or existence of a dispute of fact for reconsideration (Attach additional sheets if needed):

Date Submitted:

Authorized Signature:

**GOER Decision (Step 3 ½)**

Date Decision was Issued:

Director of the GOER/Designee: