

Performance Appraisal Appeal

| | | | |
|-----------------------|-------|-------------------------------|-------|
| Employee Name | _____ | Department Name | _____ |
| Employee ID # | _____ | Date Evaluation Received | _____ |
| Job Title | _____ | Date of Appeal | _____ |
| Appraisal Fiscal Year | _____ | Date of First Appeal Response | _____ |
| Supervisor Name | _____ | Date of Second Appeal | _____ |

- An appeal concerning a job performance rating or merit rating may not proceed beyond two appeals and all second appeals are to the Department Director unless the person issuing the job performance rating is the Department Director. In that case, the employee may appeal to an Assistant City Manager or, if the department reports to a board or commission, to a designated board or commission member.
- Employees of Non-Civil Service departments may have one appeal to the Director or ACM/Chief if they report to the Director. Assistant Directors may have one appeal to their ACM/Chief. Directors may have one appeal to the City Manager or their designee.
- Performance Appeals must be filed within ten (10) working days of receiving the evaluation and/or the written notice of the first appeal response.
- A printed or PDF copy of the performance evaluation along with the signed and completed appeal form must be sent to your HR Partner and the person designated to hear the appeal.
- Provide any documentation that you would like to be considered for a higher rating.
- Written Appeal Responses shall be issued within ten (10) working days of hearing date.

Performance Rating Being Appealed: **Unsuccessful** **Partially Successful** **Fully Successful**

I wish to appeal my evaluation and feel that my performance justifies a higher rating due to the following accomplishments and/or reasons:

I understand that I must complete this form and attach my performance evaluation, and any documentation that I wish to be considered for re-evaluation. I also understand that failure to discuss the facts of the case at any informal level of these procedures constitutes withdrawal of the appeal and the last decision rendered to be non-appealable.

Employee Signature _____ Date _____