

STATE PERSONNEL BOARD, STATE OF COLORADO

Case No. _____ [Insert case number]

COMPLAINANT'S INFORMATION SHEET

_____, [Insert your name]

Complainant

v.

_____, [Insert the name of the State Agency/Employer]

Respondent

GENERAL INSTRUCTIONS

Your Information Sheet must not exceed 10 pages in length, but exhibits do not count toward the 10-page limit.

You bear the burden of demonstrating the existence of valid issues that merit a hearing. The Board may use its discretion to grant an evidentiary hearing in the following situations:

(A) A decision of the appointing authority violates:

- (1) the State Employee Protection Act ("Whistleblower Act");
- (2) the Colorado Anti-Discrimination Act ("CADA");
- (3) the Board's grievance procedures or the department's grievance procedures; or
- (4) a grievance decision that violates an employee's rights under the federal or state constitution.

(B) A final decision from the State Personnel Director in a "Director's Review" involving the overall administration of the state personnel system violates CADA; or

(C) A final decision from the State Personnel Director in a "Director's Review" violates any rules or statutes relating to the comparative analysis process.

The Complainant submits the following Information Sheet:

FACTUAL ALLEGATIONS	
List the specific allegations you are prepared to prove that support your claims.	
What action are you appealing? (For example, grievance decision, selection decision, corrective action, etc.)	
What date did the action occur?	
What date were you notified of the action?	
What was your position on the date of the action?	
How long had you been in the position as of the date of the action?	
Were you certified in that position?	
If so, what date were you certified to the position?	
What is your current position? (If not currently employed with the state agency, write: "Not currently employed by State.")	
ADDITIONAL FACTS	
Using the numbered paragraph spaces below, describe what happened. Use one to two sentences per paragraph. If a particular exhibit supports an allegation, please reference that exhibit.	
Example: "1. My supervisor was Jane Smith. Refer to Exhibit A at page 1, Performance Review signed by Jane Smith as supervisor."	
1.	
2.	

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LEGAL ARGUMENT(S)

Please list all statutes or Board rules that support your allegations. Provide any other legal authorities that you believe the Board should consider. In addition to listing legal authorities, please explain how the legal authorities support granting you an evidentiary hearing.

SUPPORTING INFORMATION

WITNESSES

List all witnesses you plan to call to testify if a hearing is granted, including the person's name and contact information. Also describe the person's anticipated testimony and explain how the testimony will support your case.

Name:

Email Address:

Telephone Number:

Description of Testimony:

Name:

Email Address:

Telephone Number:

Description of Testimony:

Name:

Email Address:

Telephone Number:

Description of Testimony:

Name:
Email Address:
Telephone Number:
Description of Testimony:

Name:
Email Address:
Telephone Number:
Description of Testimony:

EXHIBITS

List and describe any exhibits that support your allegations. Exhibits can be documents, recordings, or other physical items that support your claims. Your exhibits should be marked using letters. If you have more than 26 exhibits, you must use A1 to A99, B1 to B99, C1 to C99, and so forth (example: after Z, your next exhibits will be A1, A2, A3, and so forth).

You must provide a copy of your exhibits to the Board and to the other side when you file your Information Sheet with the Board.

Exhibit	Description (name or title of the exhibit, date, author, etc.)
A	
B	
C	
D	

E	
F	
G	
H	
I	
J	
K	
L	
M	
N	
O	
P	
Q	
R	
S	
T	
U	
V	
W	
X	
Y	
Z	
A1	
A2	
A3	

REMEDIES AND RELIEF

List the remedies and/or relief you are requesting. If you are requesting the Board to order the other side to do something, please specify what you want the Board to order. If you are requesting money damages, please list the precise amount and the basis for requesting that amount. If you are requesting another type of remedy, please specify the nature of your request.

I am requesting the following remedy or remedies:

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SIGNATURE

Full name of the person filing this Information Sheet:

Signature:

Email address and phone number of the person filing this Information Sheet:

Date:

SERVICE

You must provide a copy of this Information Sheet and all exhibits to the other side. Please indicate below who received a copy of this Information Sheet and exhibits. Also indicate how you delivered the copy. Email delivery is preferred. You may use more than one method of delivery.

Party:	Delivery Method
Colorado Attorney General's Office Name of attorney: _____ Employment Section 1300 Broadway, 10th Floor Denver, CO 80203	<input type="checkbox"/> U.S. Mail <input type="checkbox"/> UPS <input type="checkbox"/> FedEx <input type="checkbox"/> Hand-delivery/courier <input type="checkbox"/> Email (specify address):
Other Party (if applicable):	<input type="checkbox"/> U.S. Mail <input type="checkbox"/> UPS <input type="checkbox"/> FedEx <input type="checkbox"/> Hand-delivery/courier <input type="checkbox"/> Email (specify address):
Other Party (if applicable):	<input type="checkbox"/> U.S. Mail <input type="checkbox"/> UPS <input type="checkbox"/> FedEx <input type="checkbox"/> Hand-delivery/courier <input type="checkbox"/> E Email (specify address):

CERTIFICATE OF SERVICE

I hereby certify that I have served this Information Sheet and exhibits upon the parties listed above on the date listed below.

Signature:

Date:

FILING CHECKLIST

You must complete each of these filing steps. You are responsible for ensuring timely filing.

Hardcopy mailed or hand-delivered to State Personnel Board, 1525 Sherman Street, 4th Floor, Denver, Colorado 80203 or emailed as a PDF to dpa_state.personnelboard@state.co.us.

AND

Word file emailed to dpa_state.personnelboard@state.co.us

