SCSC-411 Rev. 07-9				APPEAL REQUEST FORM
1464. U/-3	Appears Division - 1.0. Dox 509 - Harrison		A 17108-0569; (717) 783-2924	
III, as a - Appea days (s - Failure on whi	pellants MUST complete PART I, plus PART II and pplicable. Is must be received or postmarked within 20 calend ee Part II below and Part III on the back). It to attach a copy of the document announcing action change is basing your appeal will result in delay. It is form in an original and 1 copy (for your recompleted).	d/or dar on	 Return the original condition of the address TYPE or PRINT all infection to do so may cause de Appellant MUST PER 	formation except signature. Failure
	PART I - GENERAL INFORMAT	ION (TO BE COMPLETED BY ALL	. APPELLANTS.)
A. NAN	IE (LAST, FIRST AND INITIAL)		В	SOCIAL SECURITY NUMBER
CHA	RENT ADDRESS (PLEASE LET US KNOW IF YOUR ADD NGES. FAILURE TO DO SO MAY RESULT IN DISMISSA OUR APPEAL.)		WORK: ()	ONE NUMBERS (PLEASE PROVIDE BOTH) HOME: () EST CIVIL SERVICE CLASSIFICATION?
F. AGE	NCY INVOLVED	G. V	WHAT IS/WAS YOUR LATEST CIV	VIL SERVICE STATUS? ATIONARY OTHER (specify)
Any pron form	A YOU BE REPRESENTED BY AN ATTORNEY? YES NO attorney retained, now or later, must notly file an "Entrance of Appearance" in order to receive any communications ed to your appeal.		IGNATURE (<u>APPELLANT</u> MUST S DATE SIGNED	GIGN IN INK)
K. WH.	AT REMEDY ARE YOU SEEKING?			
			STATUS EMPLOYES ONLY gh, suspension or demotion.)	
Hearings - Under Section 951(a) of the Civil Service Act, any regular status employe may, WITHIN TWENTY CALENDARECEIPT OF NOTICE FROM THE EMPLOYING AGENCY, appeal in writing to the Commission any permanent separation for cause, furlough, or demotion, on the grounds that such action has been taken in violation of the provisions of this act. receipt of such appeal, the Commission shall promptly schedule and hold a public hearing. L1. CHECK APPLICABLE BOX				
951 (a)	REMOVED FURLOUGH		SUSPENDED	DEMOTED MUST ALSO COMPLETE PART III.
Section 951	(ATTACH ADDITIONAL SHEETS IF NECESS			

L3. HOW AND WHEN WERE YOU NOTIFIED OF THE PERSONNEL ACTION YOU ARE APPEALING?

IN WRITING _

VERBALLY _

_ (ATTACH COPY)

PART III - ALL PERSONS/EMPLOYES ALLEGING DISCRIMINATION

SECTION 905.1. Prohibition of Discrimination. — No officer or employe of the Commonwealth shall discriminate against any person in recruitment, examination, appointment, training, promotion, retention, or any other personnel action with respect to the classified service because of political or religious opinions or affiliations, because of labor union affiliations, or because of race, national origin, or other non-merit factors. Discrimination Appeals. — Any person who is aggrieved by an alleged violation of Section 905.1 of the Civil Service Act may appeal in writing WITHIN TWENTY (20) CALENDAR DAYS OF THE ALLEGED VIOLATION. The Civil Service Commission, if it determines that there has been a sufficient allegation of discrimination, may schedule and hold a public hearing.					
M1. EMPLOYES WHO DO NOT HAVE REGULAR STATUS AND NON - EMPLOYES WHO ARE ALLEGING DISCRIMINATION MAY ONLY APPEAL UNDER THIS PART. REGULAR STATUS EMPLOYES ALLEGING DISCRIMINATION ALSO MAY APPEAL UNDER THIS PART. CHECK THE APPLICABLE BOXES TO INDICATE THE TYPE(S) OF ACTION(S) BEING APPEALED AND THE TYPE(S) OF DISCRIMINATION. YOU MUST BE PREPARED TO PROVE YOUR STATEMENTS IF A HEARING IS GRANTED. TYPE OF ACTION BEING APPEALED:					
	REMOVAL SUSPENSION FURLOUGH PROBATIONARY DENIAL LEAVE OF ABSENCE DEMOTION REASSIGNMENT PERFORMANCE EVALUATION REPORT (Interim PER is not appealable) NON A PRODUCTION SUSPENSION OF PROBATION OF PROBATIONARY DENIAL LEAVE OF ABSENCE OTHER (SPECIFY)				
	NON-APPOINTMENT/ PROMOTION (TO WHAT JOB TITLE)				
POLITICAL OPINIONS/ AFFILIATIONS AFFILIATIONS AFFILIATIONS AFFILIATIONS AFFILIATIONS AGE DISABILITY OTHER NON-MERIT FACTORS (EXPLAIN)					
Section 951 (b)	M2. REASONS: ANSWER THE FOLLOWING QUESTIONS AS COMPLETELY AS POSSIBLE. FAILURE TO DO SO MAY RESULT IN DENIAL OF YOUR APPEAL. (Attach additional sheets if necessary.) A. What action(s) occurred which led you to believe you were discriminated against? B. Where and when did this action occur? C. Who discriminated against you? Provide name(s) and job title(s). D. Do you believe the Civil Service Act and/or Rules were violated? If so, what section(s)?				
	E. Provide any other information which you believe is relevant.				