

**SAMPLE LETTER - APPOINTING AUTHORITY'S STEP I DECISION**  
**Appeal of a Suspension, Demotion, or Dismissal**  
**Letter from the Agency Appointing Authority**

[HAND DELIVERED OR CERTIFIED MAIL - RETURN RECEIPT REQUESTED\*]

[DATE]

[EMPLOYEE'S NAME & ADDRESS]

Dear [EMPLOYEE'S NAME]:

This letter serves to inform you of my decision pertaining to the appeal of your **[SUSPENSION, DEMOTION, DISMISSAL]**. After a thorough review of all relevant documentation submitted by you as well as the agency, I find that your **[SUSPENSION, DEMOTION, DISMISSAL]** was **[NOT]** appropriate. Therefore, it is my decision that your **[SUSPENSION, DEMOTION, DISMISSAL]** be **[UPHELD/OVERTURNED/MODIFIED TO...]** The Step I summary and findings are attached.

As a preferred service employee, you may appeal this decision by submitting a fully completed Step II appeal form and any relevant documentation (including written Step I decision, disciplinary letter, and the Step I appeal form completed by the employee) within fourteen (14) days of receipt of this Step I decision letter. **An employee appealing to Step II is required to provide a written statement to the Commissioner detailing why the Step I decision was in error and specifically state why the Step I decision should be overturned, reduced or amended. An employee failing to provide such information is considered to be in default and cannot proceed to Step III of the appeals process.**

Submission can be made electronically by hand delivery, by fax, by e-mail at [DOHR.Step2Appeals@tn.gov](mailto:DOHR.Step2Appeals@tn.gov), or by U.S. certified mail to:

Department of Human Resources  
ATTN: Brigitte Tubbs-Jones  
James K. Polk Building, 505 Deaderick Street, 1<sup>st</sup> floor  
Nashville, TN 37243

Submission of this information must be made no later than fourteen (14) days after you have received the Step I decision. The Step I decision is considered as received three (3) days after it has been mailed, or in the alternative, the date it is signed for if sent via certified mail. You may find additional information regarding the appeal process in the Rules of the Department of Human Resources Chapter 1120-11 and at the Department of Human Resources' website: <http://www.tn.gov/dohr/ogc-er/appeals.shtml>.

Sincerely,

[APPOINTING AUTHORITY SIGNATURE]

[HAND DELIVERED OR CERTIFIED MAIL - RETURN RECEIPT REQUESTED\*]

**Step I Decision - [EMPLOYEE'S NAME]**

Date of written decision: [DATE]

Complainant:

[EMPLOYEE'S NAME], a [EMPLOYEE'S JOB TITLE] and a preferred service employee with [AGENCY NAME], is appealing [HIS/HER] [SUSPENSION, DEMOTION, DISMISSAL] for which she was served notice of disciplinary action by way of letter dated [DATE OF DISCIPLINE LETTER] from [APPOINTING AUTHORITY]. [INSERT DESCRIPTION OF EMPLOYEE'S JOB LOCATION & DUTIES].

[EMPLOYEE'S NAME] is seeking [INSERT CORRECTIVE ACTION EMPLOYEE IS SEEKING, FOUND ON STEP I APPEAL FORM].

Appeal:

[EMPLOYEE'S NAME] was served notice on [DATE] of her [SUSPENSION, DEMOTION, DISMISSAL] for violation of:

- [INSERT LAWS/RULES/POLICIES EMPLOYEE WAS DISCIPLINED FOR].

[EMPLOYEE'S NAME] timely appealed on [DATE] and alleged that the following statutes, rules, or policies were violated by the agency in [SUSPENDING, DEMOTING, DISMISSING] [HIM/HER]:  
[INSERT SPECIFIC LAW, RULE, OR POLICY ALLEGEDLY VIOLATED BY AGENCY, FOUND ON STEP I APPEAL FORM].

[DESIGNEE NAME] was appointed by [APPOINTING AUTHORITY] as designee to conduct the Step I investigation and discussion on behalf of the Agency pursuant to Department of Human Resources Rule 1120-11-.04(1). A discussion was scheduled and held on [DATE] at [LOCATION]. In attendance were:

- [INSERT NAMES, JOB TITLES OF THOSE IN ATTENDANCE].

Information Reviewed:

According to Tennessee Department of Human Resources Policy 12-005, Appeals Procedures for Preferred Service Employees, the Appointing Authority (or designee) may consider information obtained as a result of the investigation and documents presented during the Step I appeal or hearing.

To assist in making a determination, other additional records were requested and reviewed, including:

- [INSERT INFORMATION/DOCUMENTS/RULES/POLICIES REVIEWED].

Findings:

- [INSERT FACTUAL FINDINGS]

Decision:

- [DISCUSSION OF THE LAWS/RULES/POLICIES EMPLOYEE WAS DISCIPLINED FOR, APPLICATION TO EMPLOYEE'S CONDUCT]
- [DISCUSSION OF THE LAWS/RULES/POLICIES EMPLOYEE CLAIMS WERE ALLEGEDLY VIOLATED BY THE AGENCY, APPLICATION TO AGENCY'S CONDUCT]

Based upon the investigation conducted, review of relevant documents, and the information gathered at the discussion, the [SUSPENSION, DEMOTION, DISMISSAL] of [EMPLOYEE'S NAME] was [NOT] appropriate. I [DO/DO NOT] find a violation by [AGENCY] of [LAW/RULE/POLICY ALLEGEDLY VIOLATED BY AGENCY]. Therefore, it is my decision that the disciplinary action of [SUSPENSION, DEMOTION, DISMISSAL] for [EMPLOYEE'S NAME] be [UPHELD/OVERTURNED/MODIFIED TO...].