

Government of Newfoundland and Labrador
Public Service Commission
JES Classification Adjudication

## **JES Classification Appeal Request Form**

#### Guidelines

### Please review the following guidelines

- 1. Complete all sections of this form and submit it to classificationappeals@gov.nl.ca. All signature fields must be manually signed before submission. **Please print if completing other form fields manually.**
- 2. Eligibility to appeal a classification review decision is limited to those incumbents who signed the Position Description Questionnaire, and were active in the position at the time of submission to the Classification and Organizational Design Division.
- 3. The appeal request must be received within 14 days of receipt by the appellant(s) of notification of the Classification and Organizational Design Division's decision.
- 4. An appellant can only submit one appeal request resulting from a classification review decision. The appeal must be either an individual appeal or group appeal if applicable.
- 5. If the request for appeal is submitted by more than one appellant, then "Group Appeal" must be selected in Section 2, a group designate must be identified in Section 3, and the "Group Appendix" must be completed.
- 6. A copy of the letter notifying the appellant(s) of the Classification and Organizational Design Division's decision pertaining to the classification review being appealed must be included with the appeal form.
- 7. It is the appellant's responsibility to ensure the Adjudicator has current contact information. The appellant is required to notify the classificationappeals@gov.nl.ca email of any changes.
- 8. Section 6: Appeal Rationale, must identify the specific factor(s) being challenged and provide an associated rationale for each factor challenged.
- 9. The JES framework and compensable factor rating information are available through the link provided: https://www.gov.nl.ca/exec/tbs/newjobevaluation/#profile

**Privacy Notice:** The personal information collected in this form will be used for the purpose of assessing the appeal of the identified classification decision under the Job Evaluation System (JES). The information is collected under the authority of section 61(c) of the Access to Information and Protection of Privacy Act, 2015.

If you have questions about the collection, use, and disclosure of your personal information, please contact the Public Service Commission Information Management Coordinator at 709-729-5832 / Toll Free: 1-855-330-5810

Phone: 709-729-2658 / Toll free: 1-855-330-5810 / Facsimile: 709-729-6234 / Email: classificationappeals@gov.nl.ca

# Section 1: Powers and Limitations of the Adjudicator An Appeal Hearing will only occur if a decision cannot be rendered on the basis of the appeal file documentation. Appellants will be notified if a hearing is required.

- The appeal process is restricted to those compensable factors identified as being challenged and sufficient reasoning provided.
- The Classification Appeal Adjudicator shall not accept appeals based on job content information which differs
  from that reviewed by the Classification and Organizational Design Division. If job content differs from that
  reviewed by the Classification and Organizational Design Division, employees shall first approach the
  Classification and Organizational Design Division seeking a further review on the basis of new circumstances
  involved.
- The decision of the Classification Appeal Adjudicator on an appeal is final and binding and is not subject to the grievance or arbitration process.

Please sign and date below to confirm your intention to submit a JES Classification Appeal request and that you have read and understand the powers and limitations of the Classification Appeal Adjudicator.

Signature	Date				
Section 2: Appeal Information (Please print if completing the form manually)					
(F	PCN of Position Being Appealed PCNs of additional appellants will the recorded in the Group Appendix)				
Individual or Group Appeal? <u>Individual Appeal</u>	Sroup Appeal No. of Appellants				
Date Appellant/s Notified of the Review Decision					
Check the box to confirm the decision notification letter has been submitted with this appeal form.					
· · ·	ay Level as per JES Review Decision e.CG 22, NS 30, LX 20)				
Unionized Employee: YES NO U	Tollective agreement				

Section 3: Appellant / Group Designate Contact Information (Please print if completing the form manually)						
Appellant or Designate First Name	Apı	pel	lant or De	esignate Last Name		Middle Initial
Work Address	Work Phon	ie #	#	Work Email		
Personal Mailing Address	Personal Pl	hoı	ne#	Personal Email		
Section 4: Employer Contact I	nformation	<u>at</u>	the Time	e of the Classification Rev	<u>riew Re</u>	<u>equest</u>
Employer/Public Sector Entity		_	Name o	f Immediate Supervisor		
Supervisor Phone #		Supervis	sor Email			
Supervisor Work Address						
Section 5: Current Employer Contact Information						
Current Employer/Public Sector Entity			Name o	f Current Immediate Super	visor	
Current Supervisor Phone #			Current	Supervisor Email		
Current Supervisor Work Address						
WOIR Addiess						

### **Section 6: Appeal Rationale**

(Please print if completing the form manually)

List the Compensable Factor rating(s) being appealed. Include the current rating, and provide a rationale for appealing each factor listed. You may enter text in the fields provided or attach an additional document if required.

**Note:** A classification appeal of specific factor(s) shall not be accepted by the Classification Appeal Adjudicator based on job content which differs from that submitted to the Classification & Organizational Division.

Compensable	Current Rating	Rationale for Appeal of Current Rating
Factor(s)		
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## **JES Classification Appeal Request: Group Appendix**

This Appendix must accompany appeal requests submitted by more than one appellant.

As a signatory to this this do	ocument, appellants	confirm their intenti	on to proceed with the re	quest to appeal the classification
decision of the position (Ins	ert Position Title)			as a group,
and that they have read and	d understand the po	wers and limitations	of the Classification Appe	al Adjudicator presented in Section 1
of the this Form. (You ma	ay attach addition	al pages if required	l.)	
NOTE: The Signature field	d must be comple	ted manually. Plea	ase provide the PCN of t	he position being appealed.
Appellant Name	Phone #	E-mail	PCN	Signature

Phone: 709-729-2658 / Toll free: 1-855-330-5810 / Facsimile: 709-729-6234 / Email: classificationappeals@gov.nl.ca

## For Administrative Use

Date JES Appeal Request Form Received	d Appeal reviewed and determined to meet eligibility criteria	
	YES NO	
Comments		