



## Step I Appeal Form

Submit completed form to:

Tennessee Department of Correction

320 6th Ave North, 3rd Floor, Rachel Jackson Bldg. Nashville, TN 37243

Connie Johnson, Director of Employee Relations

Phone: 615-253-8026

TDOC.Appeals@tn.gov

To file a complaint and commence Step I of the appeals process, the employee must submit a fully completed Step I appeal form and any relevant documentation to the agency's appointing authority or designee. The submission may be made either electronically, by hand delivery, or by U.S. certified mail. Submission of this information must be made no later than fourteen (14) days after complainant receives written notice of dismissal, demotion, or suspension. It is the responsibility of the employee to ensure the Step I appeal form and all documentation has been received by the agency. Confirmation of receipt can be made by contacting the agency at: TDOC.Appeals@tn.gov or by dialing (615) 253-8026. TDOC will confirm receipt by email unless complainant designates another preferred method of communication below.

Are you / were you a preferred service employee? Yes \_\_\_\_ No \_\_\_\_

Have you completed your initial probationary period? Yes \_\_\_\_ No \_\_\_\_

When completing this section, it is very important to include reliable contact information so that the agency can contact you throughout the appeals process.

What is your preferred method of communication/correspondence for Step I appeal purposes?

Email \_\_\_\_

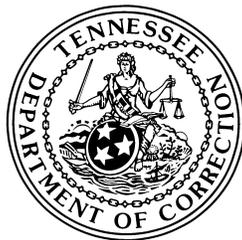
Mail \_\_\_\_

***Please note that should your contact information change during the appeal process, it is your responsibility to notify appropriate parties and update contact information.***

Complainant's name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Preferred phone number: \_\_\_\_\_



## Step I Appeal Form

Personal email address:

Edison ID number:

Job title:

Immediate supervisor's name:

Complainant's official station/work location:

Identify the specific law, rule, or policy allegedly violated by TDOC.

Which of the following actions does the alleged violation result from? (check one)

Dismissal: \_\_\_\_      Demotion: \_\_\_\_      Suspension; *If suspension, number of days:*

Date of alleged violation (application of specific law, rule, or policy): \_\_\_\_\_

Briefly describe how TDOC is in violation by issuing current action. (application of specific law, rule, or policy):

Corrective action sought by employee:

Reinstatement of job:

Reinstatement of leave:

Back pay:

Reduction of suspension:

Other (please specify):

Employee's signature:

Date:

