

**STATE OF NEVADA
SPECIFICITY OF CHARGES**

Name: _____ Employee ID#: _____ Budget Account: _____
 Current Class: _____ Grade: _____ Supervisor: _____
 Step: _____
 Department: _____ Division: _____ Date: _____
 Section: _____ Time: _____

This is to inform you that you are alleged to have violated section 284.650 of the Nevada Administrative Code, as follows:

Date(s)	Violation(s)

A recommendation has been made by: _____, _____
Name Title

that it is in the best interest of the State of Nevada to take the following disciplinary action(s):

Proposed/Actual Effective Date: _____
Signature (Person recommending action)

- In accordance with NAC 284.656, a hearing has been scheduled on your behalf to determine whether such action is warranted. Following the hearing and prior to the proposed effective date, you will be given a copy of the finding(s) and recommendation(s), if any, resulting from the hearing and be informed in writing of the appointing authority's decision regarding the recommended action(s).
- In accordance with paragraph 2(b) of NAC 284.6563, the **effective date of your discipline is immediate** as noted above. A hearing in accordance with NAC 284.656 will follow as soon as practicable after the effective date of your discipline.

Note: If you wish to appeal your discipline, please be aware that pursuant to NRS 284.390, an appeal is deemed timely if it is postmarked within 10 working days after the **effective date of the disciplinary action**.

The hearing will be conducted by:

_____ at _____ on _____
Name Title Time Date

at _____
Location (Include complete address)

Pursuant to NAC 284.656, the hearing process is an informal proceeding between you and the appointing authority or his or her designated representative. Witnesses are not permitted. Each party may be accompanied by a person of his or her choice. Please refer to NAC 284.656 or direct questions concerning this notice and hearing to the appointing authority, personnel officer, or other agency personnel familiar with the procedure. *(For information regarding the hearing and your right to waive the hearing, you should refer to NAC 284.6561.)*

 Signature of Appointing Authority or Designated Representative

Signature of Employee: I understand that by acknowledging receipt of this Specificity of Charges, I am neither admitting guilt nor giving up any appeal rights I may have under NRS 284.390.

 Employee's Signature Date Time

 Witness' Signature (Required if employee refuses to sign)

 Signature and Title (Person serving this notice)

Copy: Division of Human Resource Management — Central Records Service Jacket; Department; Appointing Authority; Employee.