

**AGENCY MOTION TO DISMISS EMPLOYEE GRIEVANCE  
THAT HAS BEEN SUBMITTED TO THE  
EMPLOYEE-MANAGEMENT COMMITTEE**

Grievance #:	
Employee Name:	
Department/Division Name:	
Agency Contact Name and Title:	
Agency Contact Telephone # and Email Address:	

The appointing authority is requesting that the above grievance be dismissed on the following grounds:

- The employee is not in the classified service.
- The employee is not a permanent employee. Hire Date: \_\_\_\_\_
- The grievance is not in the jurisdiction of the Employee-Management Committee because there is a hearing provided by another entity.
- Federal law (statute and section#, heard by): \_\_\_\_\_
- Appeal of a classification decision heard by the Personnel Commission – NRS 284.165
- Refusal to examine an applicant or certify an eligible applicant on a list heard by the Personnel Commission – NRS 284.245
- Appeal of Catastrophic Leave heard by the Committee on Catastrophic Leave – NRS 284.3629
- Appeal of an involuntary transfer heard by a Hearing Officer – NRS 284.376
- Appeal of a dismissal, demotion, or suspension heard by a Hearing Officer – NRS 284.390
- Appeal when there is alleged reprisal or retaliatory action taken against an employee heard by a Hearing Officer – NRS 284.647
- The grievance is substantially similar to a case previously decided by the Committee. Case name and #: \_\_\_\_\_

Other. Please specify:

Agency Appointing Authority  
or Designated Representative:

\_\_\_\_\_

Signature

Date

\_\_\_\_\_

Print Name

Title

Distribution: Original to Employee-Management Committee  
Copy to employee or employee's representative

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