

**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

May be submitted within 10 working days after the date of the Order Scheduling Hearing
by mail, email, fax or hand delivery to:

Chair of the Employee-Management Services Committee
c/o EMC Coordinator

100 N. Stewart St., Suite 200

Carson City, Nevada 89701-4204

Fax (775) 684-0118 Phone (775) 684-0135

Email: EMCCoordinator@admin.nv.gov

*The EMC Coordinator will forward a copy of the Motion to Dismiss to the grievant or grievant's
representative.