

DATE:

TO:

FROM:

RE: Disciplinary Decision of Dismissal

Purpose of Notification

Relevant Past Occurrences or Active Disciplinary Actions

Incidents Resulting in This Disciplinary Decision

Additional Information Provided at Pre-Disciplinary Conference

Disciplinary Decision

You will be paid for any accrued vacation leave up to a maximum of 240 hours and any bonus or compensatory leave balance you may have. In addition, if eligible, you will be paid a pro-rated longevity payment. Any accrued sick leave balance will be reinstated should you return to a leave-earning position with the State of North Carolina within five years from your date of separation. Any debts you may owe to the University will be deducted in your last paycheck, as required by law or State policy.

You are not to return to the campus of Winston-Salem State University except for official business or events open to the public such as cultural and athletic events. Returning to campus for any other reason will be considered trespassing.

You are requested to collect your personal belongings and turn over all University property, including but not limited to your uniforms, keys, access/ID card, parking tag, P-Card, etc. immediately.

Retention of Disciplinary Action

This disciplinary action is being issued pursuant to the OSHR SHRA Employee Disciplinary Action Policy and will be retained as part of your permanent personnel file along with all related disciplinary action documents.

Appeal Rights

Human Resources Director
Office of Human Resources
203 Eller Hall
Winston-Salem State University
Winston-Salem, NC 27110

A copy of the University of North Carolina SHRA Grievance Policy has been attached for your information. If you have questions about your appeal rights, you may contact Human Resources Director for Employee Relations & Talent Management.

Public Records

NCCGS 126-23 (a)(11) provides that dismissal letters are public information and must be released if requested.

Supervisor's Signature

Supervisor's Signature: _____ Date: _____

Print Name/Title: _____

Employee Acknowledgement

I acknowledge that my signature is simply confirmation of receipt of this letter and that my signature does not imply agreement with the content.

Employee's Signature: _____ Date: _____

Print Name: _____

Attachment: University of North Carolina SHRA Grievance Policy
SHRA Request to Appeal Form

cc: NAME (Vice Chancellor)
Director/Chair/Dean/Assoc. or Asst. VC
Human Resources Director for Employee Relations & Talent Management
Department Personnel File