UVic/ CUPE 951 Joint Job Evaluation – Appeal Request

Please complete this form, provide comments, print, sign and submit to Human Resources: email [jec951@uvic.ca](mailto:jec951@uvic.ca)

Please indicate factor(s) you’d like the committee to reconsider. Please provide details with clear and specific examples below for the respective factor(s) that are substantive, relevant and new information that you or your supervisor did not provide that was applicable at the time the JEQ was completed.

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| --- | --- | --- | --- |
| Name: | Department: | | |
| Title: | Position No: | | Date submitted to Supervisor: |
| Supervisor name: | | Excluded Manager name: | |
|  | | | |
| Factor: Select a factor Level Requested:  *Provide specific examples:* | | | |
| Supervisor’s and Excluded Manager’s Comments: | | | |
| Factor: Select a factor Level Requested:  *Provide specific examples:* | | | |
| Supervisor’s and Excluded Manager’s Comments: | | | |
| Factor: Select a factor Level Requested:  *Provide specific examples:* | | | |
| Supervisor’s and Excluded Manager’s Comments: | | | |
| Supervisor’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_  Excluded Manager’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Employee’s Final Comments:    Employee’s Final Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |