



City of Seattle
CIVIL SERVICE COMMISSION

700 5th Avenue, Suite 1670
PO Box 94729
Seattle, WA 9124-4729
Office: 206-233-7118
Fax: 206-684-0755

REQUEST TO REVIEW, APPEAL OR MODIFY A DECISION BY THE EXECUTIVE DIRECTOR

INSTRUCTIONS

An appeal to the commission of a decision by the Executive Director must be sent to the Civil Service Commission **within twenty (20) calendar days after the date of the Order. (CSC Rule 5.03)**

If this request is timely, you will be scheduled to appear before the Commission at an upcoming scheduled monthly meeting. Staff will contact you with attendance information.

Appeal No. _____	Date of the Executive Director's Decision _____
Date Appeal Filed _____	Date this appeal received by CSC (Office use only): _____

Full Name of Appellant	Work Address
Residence Address	Work Telephone
City State Zip	Employee ID
Home/Cell Phone:	Department
Email:	Job Title

Address: _____ Email/Phone: _____

B) APPELLANT:

If you **do not** have an attorney or a representative, please enter the address where documents related to this **Request to Review, Appeal or Modify a Decision by the Executive Director** should be sent:

Mailing Address: _____

Personal Email: _____

Home/Cell Phone: _____

SIGNATURE OF APPELLANT _____	DATE _____
SIGNATURE OF ATTORNEY OR REPRESENTATIVE (IF FILLING OUT THIS FORM) _____	DATE _____

City of Seattle Civil Service Commissions

Seattle Municipal Tower, 700 Fifth Avenue, Suite 1670 PO Box 94729 Seattle, WA 98124-4729
Tel (206) 437-5425, Fax: (206) 684-0755, <http://www.seattle.gov/CivilServiceCommissions/>

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