



REQUEST FOR BINDING ARBITRATION
(Arbitration is only available to appeal a removal/termination, demotion,
or suspensions of 120 hours or more.)

To: Director of Personnel Services

The undersigned files his/her answer to the subject order and demands an appeal hearing thereon, as follows:
(Check boxes where appropriate, use additional pages if necessary)

Name of Appellant Job Title
Address Phone
Name of Representative Suspension, Duration
Address/Phone Removal
Name of Department Date of Order
Director

The allegations of the Order which are disputed, if any, are (check one) none or as follows:

Allegation Denial or Contrary Allegation

The extent or degree of discipline is (check one) disputed not disputed, for the following reasons:

I hereby demand that my appeal be heard by an arbitrator and be governed by the binding arbitration provisions of the Memorandum of Understanding between the City and the Fresno Police Officers Association. I (check one) authorize do not authorize, my recognized employee organization to represent me in all matters covered therein.

I expressly waive my right to a hearing before the Civil Service Board and/or Hearing Officer under the Fresno Municipal Code sections 3-283 and 3-284.

I agree to pay my share of the fees and expenses of the neutral arbitrator in consideration for services under this procedure, and in the amounts and method of payment specified in the Memorandum of Understanding, including any fee to obtain a list of neutral arbitrators from the State of California Mediation and Conciliation Service, should my recognized employee organization not agree to assume such obligation. Effective July 1, 2010, the fee to obtain a list of neutral arbitrators from the State of California Mediation and Conciliation Service is \$50.00. One half of this fee must be submitted with this appeal form. Please make a cashier's check in the amount of \$25.00 payable to the Personnel Services Department. I further agree and understand that the City is not responsible for my share of the fees and expenses of the arbitrator.

Dated this day of , 20 , at Fresno, California.

I declare under penalty of perjury that the foregoing assertions of fact are true and correct.

Employee's Signature