

**University of Puget Sound
Request for Reconsideration**

*This form is to be used in conjunction with the staff **Changes in Employment and Compensation Status policy**, available online at <http://www.pugetsound.edu/about/offices--services/human-resources/policies/staff-policies/changes-in-employment-and-comp/>. Requests for reconsideration may be filed only if the affected staff member believes the employment and/or compensation status change is based on improper or inconsistent application of the policy. Use reverse side or additional pages if necessary.*

Describe the facts or circumstances about your employment and/or compensation status change which you believe demonstrate improper or inconsistent application of the policy:

Describe your requested outcome or alternative(s) to the change in employment and/or compensation status:

Name (printed): _____

Date: _____

Signature _____

Received by: _____

(AVP for Human Resources or designee)

Date: _____