



**UNIVERSITY OF COLORADO PERFORMANCE MANAGEMENT PROGRAM
DISPUTE RESOLUTION PROCESS**

REQUEST FOR INTERNAL UNIVERSITY REVIEW

Retaliation against any person(s) involved in the Dispute Resolution Process is prohibited.

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|----------------|---|
| Date: | Job Title: |
| Employee Name: | Department: |
| Employee ID #: | Person who completed my final performance evaluation: |

I wish to have the following reviewed:

My final overall performance evaluation.

The application of the CU Performance Management Program to my final overall performance evaluation.

If I am disputing "The application of the CU Performance Management Program to my final overall performance evaluation," and am unsatisfied with the decision of my Decision Making Authority, I wish to file a written request for external review with the State Personnel Director.

I believe the error or problem is:

To resolve this issue, I have taken the following actions:

I request the following resolution:

| | |
|---------------------|-------|
| Employee Signature: | Date: |
|---------------------|-------|

For additional information, contact Employee Relations at 303-492-6475. Submit this form within five business days of final performance evaluation meeting to: (1) the Decision Making Authority (or designee) whose name was provided by your supervisor during discussion of your final overall performance evaluation and is indicated on the Planning and Evaluation Form, (2) your supervisor and (3) Employee Relations.