

**GENERAL INSTRUCTIONS:** Per the California Code of Regulations, title 2, section 17036 ([MSS Selection Process Appeals](#)), persons who take or apply to take Interagency Merit System Services (MSS) county examinations may file selection process (examination) appeals with CalHR’s MSS Appeals Unit.

Appellants are required to complete the following process:

1. Complete all items on this form in sections below (*Do not include your Social Security Number on this form*)
2. Submit a copy of their disqualification letter. Appeal cannot be opened until this document is received.
3. Clearly state the facts about the selection process that establish the basis of the appeal and request a specific remedy.

Failure to include any of the requested information may result in your appeal being rejected. This appeal form must be filed with CalHR within 30 calendar days of the date on the notice. Please send this completed form along with the requested documentation to [mssappeals@calhr.ca.gov](mailto:mssappeals@calhr.ca.gov).

**Note: File one form for each appeal.**

**1. Appellant Information**

Name (First, Middle Initial, and Last)		E-mail Address	
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
Street Address	City	State	Zip Code
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Primary Phone Number	Alternative Contact		
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>		

**2. Employment / County Agency Information**

Title of Position Being Appealed	Name of County Where Position Being Appealed is Located		
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>		
MSS Recruitment #	Date You Applied to the Position	Date of Denial Notification	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	

**3. Reason for Appeal**

Please indicate below the reason(s) for your appeal:

- For alleged irregularity, discrimination, bias, or fraud in one or more steps in an examination
- For alleged improper acts or circumstances resulting in erroneous interpretation and application, by the examiners, of the skills, knowledge and abilities considered to be essential for satisfactory performance in the class for which the candidate is being examined.

\_\_\_\_\_  
Signature of Appellant/Applicant

\_\_\_\_\_  
Dated

**Note:** Appeals of decisions from selection procedures must be filed in writing with CalHR within 30 calendar days of the date on which notification of the results of the selection process were mailed to the candidate. Please note that notifying or conferring with Merit System Services does not extend the time for filing an appeal with CalHR. Your rights may be lost if you fail to file with CalHR within the 30-day time limit. Your appeal should include a description of the facts that support your contention that the selection process was improper.

#### 4. Description of Supporting Facts

(Attach an additional sheet if more room is needed)