

SAMPLE NOTICE 2
(LAYOFF OR DEMOTION IN-LIEU-OF LAYOFF)

State of California

MEMORANDUM

TO: Howard Stone
Senior Lapidarist

DATE: May 1, 2008

FROM: Jeff Bolden
Personnel Office
Department of Gemology

SUBJECT: Notice of Layoff or Demotion in- Lieu-of Layoff

The Department of Gemology has been directed to reduce its budget for the 2008-2009 Fiscal Year by 15%.

The Department has kept positions vacant for salary savings and placed employees in the State Restriction of Appointments Program, eliminated several new construction projects, reduced research projects, and increased industry funding. Unfortunately, through these efforts, we have only been able to reduce the budget by 10%, and are forced to layoff 15 employees.

One of the two employees in your class of Senior Lapidarist must be laid off, effective July 1, 2008. Both positions are located in Sacramento, and there are no vacant positions in the class. Your seniority score through May 1, 2008 is 240, which is lower than that of the other incumbent 385. The primary demotional path for the class is to Associate Lapidarist and then to Lapidarist. In addition, you have personal demotional rights to the class of Staff Services Manager I, based on your prior service in that class. There are no vacancies in either the Associate Lapidarist or Staff Services Manager I class; however, your seniority score is high enough to allow you to demote to either class and remain in either class in the Sacramento area, by "bumping" someone else. You have the right to see the seniority list for the Senior Lapidarist class that is on file in the Personnel Office located at 1111 Rock Road, Room 142, West Sacramento, during normal business hours of 8 a.m. to 5 p.m., Monday through Friday.

Attached to this Notice is Department of Personnel Administration Form DPA-015. On Part I of the form, you should indicate which, is either, of the demotional options you wish to exercise. You do not need to complete Part II of the form, because you have no options to transfer. Complete Part III only if you do not wish to exercise your right to demote. Complete Part IV, because your name will be placed on the reemployment list for the Senior Lapidarist whether you demote or elect one of the other options in Part III. Your name will remain on the list for five years. In Part IV, you should indicate the types of appointment, time base, and location in which you are interested. You may also elect to have your name placed on the inactive reemployment list if you elect to be laid off, and are not immediately interested in reemployment. You may change the inactive status at any time by writing to the State Personnel Board. You should sign the form, insert your current mailing address and telephone number, and return the original of the form to the Personnel Office no later than May 12, 2008. You should retain a copy of the form for your records and use.

Once you are laid off, you are eligible for Unemployment Insurance (UI). You should access the Employment Development Department (EDD) website to identify how to apply for UI. If you intend to choose an earlier layoff date (Part III of the Form DPA-015), contact the EDD Office BEFORE YOU MAKE THE DECISION to see if it will impact your benefits.

You can continue health, dental, and vision coverage for yourself and your dependents for up to 18 months after layoff by applying for COBRA continuation coverage. COBRA is the abbreviation for Consolidated Omnibus Budget Reconciliation Act, the federal law that allows individuals to continue participation in their employer's group plan if they are laid off.

If you elect to be laid off, the Department of Gemology will issue you a check for unused vacation or annual leave and compensating time off to which you are entitled. Any sick leave will remain in your records and be credited to you if you return to State service while you are still on a reemployment list.

You may appeal this notice as provided by DPA Rule 599.904, unless otherwise provided by your collective bargaining agreement.

If you have any questions, please contact [Contact Name], at telephone number [Phone Number].

Signature

Title

Date

Attachment

NOTES:

SEND THIS NOTICE TO THE EMPLOYEE VIA CERTIFIED MAIL WITH RETURN RECEIPT REQUESTED. PROOF OF SERVICE SHOULD BE COMPLETED.