

INTENT TO VOID NOTICE – OVER 1 YEAR (MUST BE BAD FAITH)

TEMPLATE

[INSERT DEPT. LETTERHEAD]

Date

Employee Name

Employee Address 1

Employee Address 2

Personnel Officer Name

Personnel Officer

Department Name

Human Resources

Department Address

RE: Intent to Void Notice – Unlawful Appointment

The **[DEPARTMENT NAME]** has determined that your appointment to the classification of **[CLASSIFICATION TITLE]**, effective **[DATE EMPLOYEE WAS OFFERED AND FORMALLY ACCEPTED THE POSITION]** is unlawful.

Based on information available, the **[DEPARTMENT NAME]** determined the appointment is unlawful due to **[REASON FOR UNLAWFUL APPOINTMENT DETERMINATION]**. The **[DEPARTMENT NAME]** also concluded that **[YOU/DEPARTMENT]** did not act in good faith. The determination was based on the following findings:

[LIST SPECIFIC FACTS AND INFORMATION RELEVANT TO THE UNLAWFUL APPOINTMENT DETERMINATION, INCLUDING THE DETERMINATION OF BAD FAITH]

Per California Code of Regulations, title 2, section 243.5, you have fifteen (15) calendar days from the date of this letter to respond, either verbally or in writing, to the **[DEPARTMENT NAME]** at the contact information listed below. This is your opportunity to provide additional information to refute the determination the **[DEPARTMENT NAME]** has reached relative to your appointment.

The human resources office is available to answer questions pertaining to your employment rights during the unlawful appointment investigation process. At this time,

you will continue to work and receive compensation in the **[CLASSIFICATION TITLE]** classification.

If you have any questions regarding this notice, please contact **[ASSIGNED STAFF]** **[STAFF CONTACT INFORMATION]**.

Sincerely,

Personnel Officer Name
Personnel Officer
Department Name
Human Resources Division