

STATE PERSONNEL BOARD, STATE OF COLORADO

Case No. _____ [Insert case number]

COMPLAINANT'S MOTION FOR _____ [Instruction: please indicate the purpose of your motion. For example, "Motion for Extension of Time."]

_____, [Insert your name]

Complainant

v.

_____, [Insert the name of the State Agency/Employer]

Respondent

The Complainant submits this motion in accordance with Board Rule 8-47:

CONFERRAL

Prior to filing a motion, you must confer with the other side's attorney about the motion. In general, a face-to-face or telephone conversation is preferred over an email communication. If you did not confer with the other side's attorney about the motion, you must state the reason for not conferring.

I conferred with Respondent's attorney about this motion.

The attorney's name is:

_____.

Respondent's attorney informed me that Respondent:

Does not oppose this motion

Opposes this motion

I did **not** confer with Respondent's attorney because:

The attorney did not return my phone call/email. **Please describe your efforts to confer:**

Other. **Please describe why you did not confer with the other side:**

Instruction: In general, you must show good cause for the request in your motion. "Good cause" means a good reason for making your request that is not due to an act or omission on your part.

MOTION

Please state what you are requesting, the reason for your request, and all legal authority that supports your request. Your legal authority might be a Board Rule, a case, a statute in the Colorado Revised Statute, a provision of the Colorado Constitution, or other legal authority.

DATE, SIGNATURE & INFORMATION ABOUT YOU

Full name of the person filing this motion:	Signature:
Email address and phone number of the person filing this motion:	Date:

SERVICE

You must provide a copy of this Motion to the other side. Please indicate below who received a copy of this Motion. Also indicate how you delivered the copy. Email delivery is preferred. You may use more than one method of delivery.

Party:	Delivery Method
Colorado Attorney General's Office Name of attorney: _____ Employment Section 1300 Broadway, 10th Floor Denver, CO 80203	<input type="checkbox"/> U.S. Mail <input type="checkbox"/> UPS <input type="checkbox"/> FedEx <input type="checkbox"/> Hand-delivery/courier <input type="checkbox"/> Email (specify address):
Other Party (if applicable):	<input type="checkbox"/> U.S. Mail <input type="checkbox"/> UPS <input type="checkbox"/> FedEx <input type="checkbox"/> Hand-delivery/courier <input type="checkbox"/> Email (specify address):

CERTIFICATE OF SERVICE

I hereby certify that I have served this Motion upon the parties listed above on the date listed below.

Signature:

Date:

FILING CHECKLIST

You must complete each of these filing steps. Note that you may need to hand deliver your filing to ensure timely receipt.

Hardcopy mailed, hand-delivered, faxed, or emailed to State Personnel Board, 1525 Sherman Street, 4th Floor, Denver, Colorado 80203. Fax number is 303-866-5038. Do not fax documents in excess of ten pages. Email address is dpa_state.personnelboard@state.co.us

