

**ELIZABETH CITY STATE UNIVERSITY
NOTICE OF FINAL AGENCY DECISION**

Unlawful Workplace Harassment

To: _____
(state employee)

From: _____
(Person designated by agency to execute waiver)

The agency has made the final determination/decision required by G.S. 126-34 regarding the unlawful workplace harassment complaint that you filed on _____, 200_.

By law, this agency has until _____, 200_ to make a determination with regard to your complaint. This memorandum is to inform you that this agency hereby waives its right to make another or different determination with regard to your unlawful workplace harassment complaint between now and _____, 200_.

In addition, because the agency has waived its right to make another or different determination within this time period, you have 30 calendar days to file an appeal of the final agency decision. The 30-day period begins upon receipt of this notice and the attached Final Agency Decision.

Signature
(Person designated by agency to executed waiver)

Date

ELIZABETH CITY STATE UNIVERSITY

ACKNOWLEDGMENT OF WAIVER

Unlawful Workplace Harassment

I hereby acknowledge receiving a copy of the Final Agency Decision and the Notice of Final Agency Decision and Waiver of the agency's right to make another or different determination with regard to my unlawful workplace harassment complaint. I further acknowledge that I have 30 calendar days from receipt of these documents to appeal to the State Personnel Commission by filing a petition for a contested case hearing at the Office of Administrative Hearings, pursuant to G.S. 150B-23.

(employee)

(date)

(Instructions: Please complete the Acknowledgment of the Unlawful Workplace Harassment Waiver and return to the agency.)