

Written Appellate Decision (STS-F045)

To:

Date: _____

Re: Appellate Determination

Upon review of all relevant information, I find as follows:

Procedural irregularity:
□ did □ did not affect the outcome of the matter or □ not basis of appeal.

Reasoning, if applicable:

New evidence:
□ did □ did not affect the outcome of the matter or □ not basis of appeal.

Reasoning, if applicable:

3. A conflict of interest or bias of the investigator/decision-maker:

 \Box did \Box did not affect the outcome of the matter or \Box not basis of appeal.

Reasoning, if applicable:

Signature: _____

Name: _____

Position: Chief of Staff/designee