OAL DKT. NO. CSV AGENCY DKT. NO. 20\_\_

## **SETTLEMENT AGREEMENT**

IN THE MATTER OF		
AND		
•		solved all disputed matters and enter of all issues in controversy between
	Notice of Disciplinary Actionary action	on dated
<u>Charge</u>	<u>Discipline</u>	Dates Effective
his/her appeal and requ	•	withdraws  Respondent Appointing Authority  agrees that the following
result will occur with rega		-

removal to the effective date of resignation shall be treated as follows:

The parties acknowledge that under <u>N.J.A.C.</u> 17:1-2.18(b) and (c), no pension or seniority time may be credited for periods for which the employee is not paid by the employer.

- D. \_\_\_\_\_\_ (Respondent Appointing Authority) shall amend Appellant's personnel records to conform to the terms of the settlement. All internal records of the Appointing Authority \_\_\_\_\_ will be kept intact. Nothing herein shall preclude the Appointing Authority from releasing information on this matter to anyone who has a release executed by Appellant or as consistent with the law. Any information regarding the underlying charges will be provided to the Public Employees' Retirement System pursuant to N.J.S.A. 43:1-3.3 as amended effective April 14, 2007.
- E. Appellant waives all other claims against Respondent Appointing Authority with regard to this matter, including any award of back pay, counsel fees or other monetary relief, except as may otherwise be provided herein.

OAL DKT. N	). CSV	
------------	--------	--

the Age Discrimination in Employment Act, Title 11A—the Civil Service Act, the Older Workers Benefit Protection Act, the Occupational Safety and Health Act, the Public Employees' Occupational Safety and Health Act, the New Jersey Smoking Act, New Jersey wages and hours law, public works statutes, unemployment compensation laws, disability benefits laws, the United States Constitution, the New Jersey Constitution, any workers' compensation or common law claims and any contract express or implied. This waiver includes all claims involving any continuing effects of actions or practices which arose prior to the date of this Settlement Agreement and bars the use in any way of any past action or practice in any subsequent claims, except pending workers' compensation claims.

- H. The parties agree that if any portion of this Settlement Agreement is deemed unenforceable, the remainder of this Settlement Agreement shall be fully enforceable.
- I. This agreement will become effective only if approved by the **CIVIL SERVICE COMMISSION**. Any disapproval by the **CIVIL SERVICE COMMISSION** shall not interfere with the rights of either party to pursue the matter further.

DATE	Appellant
DATE	Respondent
DATE	ON BEHALF OF
DATE	ON BEHALF OF
DATE	ON BEHALF OF

## **CERTIFICATION**

l,,	being the moving party in this matter,
hereby certify that I have reviewed this Settleme	ent Agreement and fully understand its
meaning and terms. I acknowledge my understa	nding and verify my acceptance of the
terms of this Settlement Agreement. I acknowled	dge that my representative questioned
my understanding, verified my acceptance of the	e terms of this Settlement Agreement,
and answered all my questions regarding this	settlement to my satisfaction. I am
satisfied with my representation and I enter into the	nis Settlement Agreement voluntarily.
I also understand that if this Settlement	
<b>SERVICE COMMISSION</b> , my claim against the R	espondent will terminate.
I certify that the foregoing statements made any of the foregoing statements made by me	·
punishment.	
DATE N	AME