

**HIDALGO COUNTY CIVIL SERVICE COMMISSION
PRE-HEARING STATEMENT**

PLEASE READ THESE INSTRUCTIONS:

Please complete, sign, and return this Pre-Hearing Statement to the Commission Secretary. If you want the Commission to consider any documents you have which support your position, you need to include a copy of those documents with this Pre-Hearing Statement, and you should also complete and return Commission Form 11 – Exhibit List.

This completed form should be returned to the Commission Secretary, along with copies of any documents you want the Commission to consider, at least five (5) calendar days before the date the Commission is scheduled to hear the complaint, or grievance. The mailing address for the Commission Secretary is 505 South McColl Rd., Suite A, Edinburg, TX 78539.

You also need to furnish, the other parties to this complaint/grievance, a copy of your completed Pre-Hearing Statement, with all your attachments.

If you have questions regarding this form, please contact the Commission Secretary at (956) 318-2660.

Civil Service Case Number: _____

Name and address of the party filing the complaint or grievance: _____

Name of the county department/individual against whom the complaint or grievance was filed:

This Pre-Hearing Statement is filed on behalf of the: Employee County and/or District

Who will present your side of the case to the Commission? _____

In as few words as possible, summarize your side of the story on the pending complaint or grievance:

List the names and addresses of persons who will testify for you at the hearing:

Do you want the Commission to consider any documents at the hearing? Yes No
If the answer is yes, you also need to complete Commission Form 11 – Exhibit List, and attach to this Pre-Hearing Statement, a copy of the completed Form 11, and each of the documents you want the Commission to consider.

What do you want the Commission to do for you in this complaint or grievance?

Date this Pre-Hearing Statement was completed: _____

Name of Person Completing this Pre-Hearing Statement: _____

Signature of Person Completing this Pre-Hearing Statement: _____

Date Pre-Hearing Statement received by Commission Secretary: _____