

APPEAL LETTER FOR DISMISSAL

To: _____
From: _____
Subject: _____

Re: Appeal Against Dismissal

I write to formally appeal against the decision to dismiss me from my employment. I believe that the dismissal was unfair and was not conducted in accordance with the principles of natural justice and the Employment Rights Act 1996.

Grounds for Appeal:

1. Procedural Unfairness: The dismissal process did not follow the correct disciplinary procedures as outlined in the company handbook and UK employment law. I was not given adequate notice of the allegations or a fair opportunity to respond. 2. Lack of Evidence: The evidence presented to justify the dismissal was insufficient, incomplete, or inaccurate. 3. Discrimination: The dismissal may have been influenced by discriminatory factors contrary to the Equality Act 2010. 4. Mitigating Circumstances: Relevant circumstances and explanations which were not properly considered prior to the dismissal decision.

Facts Supporting My Appeal:

I request that the following facts are taken into account: - Details of the incident or issue leading to dismissal. - Any witnesses or supporting documents available. - Previous positive employment record and contributions. - Any relevant communications or meetings that have occurred. - Explanation or context that was not sufficiently considered.

Requested Outcome:

I respectfully request that the dismissal decision be reviewed and reconsidered with the possibility of reinstatement or other appropriate remedy, including but not limited to compensation and/or an alternative resolution as deemed fair and lawful.

Right to Representation:

Please note that I am entitled to be accompanied at any appeal hearing by a trade union representative or a colleague as per the Employment Relations Act 1999.

Confidentiality Notice:

This appeal letter and all related communications are confidential and intended solely for the use of the recipient within the scope of the appeal process.

Sincerely,

Signature: _____

Name: _____

Position: _____

Decision on Appeal: _____ Comments:

_____ Signed:

_____ Date:

APPELLANT'S SIGNATURE

EMPLOYER'S REPRESENTATIVE SIGNATURE

Signature: _____

Signature: _____

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