

PD-14 Submission Process

A PD-14 must be submitted to OSHR for any settlement agreements, mediation agreements and resolutions of contested cases or court actions that require the entering of data into the HR payroll system involving employees subject to the State Human Resources Act (Chapter 126 of the North Carolina General Statutes). All such agreements and orders are required to be submitted through the Smartsheet platform for review and approval by OSHR/OSBM for compliance with relevant HR rules and policies.

Walkthrough

- Use the link below to access the PD-14 Submission Form.
(<https://app.smartsheet.com/b/form/95fdf17b1eeb447993cc49946fd48c5c>)
- Enter valid information within all six sections. *Required fields will be denoted by a red asterisk.*
 - **Section One:** Includes general information regarding the Agency and Representative. You may also include the email address of additional individuals who should receive a copy of the submitted information.

Section 1: Agency Information

Date Submitted

Agency/University

Submitted By *

Agency Representative E-mail *

Agency Representative Phone Number

E-mail address(es) for additional Agency notifications
* If sending alerts to multiple recipients, please separate the e-mail addresses with a semi-colon (;)*

- **Section Two:** Includes information regarding the grieving employee.

Section 2: Employee Information

Employee First Name *

Employee Last Name *

Personnel Number *

Race

Gender

Position Classification

Competency Level

For State University Employees Only

- **Section Three:** Includes specific case information. Please note, you may select multiple responses to “Grievable Issue” as well as “Discrimination Basis.” (*Reference Image 3*)

Section 3: Case Information

Case Number

Enter OAH Case Number if applicable.

Type of Settlement *

Grievable Issue *

Select all that apply.

Discrimination Basis

Only applicable if grievance is based on discrimination. Select all that apply.

Primary Corrective Action

Secondary Corrective Action

Additional Corrective Actions

Summary of Facts

- **Section Four:** Includes all payout information. *All fields are required.* Please enter “0.00” in any fields where there is no amount.

Section 4: Pay Calculations

All fields must be completed. Enter 0 if there is no amount.

Total Gross Earnings *

Total Interim Income *

Total Taxes *

Other Deductions *

Attorney Fees *

Front Pay *

Punitive Damages *

Other *

- **Section Five:** Checking these boxes certifies that the appropriate agency has reviewed and approved the settlement agreement. You may select “Not Applicable” if certification is not required.

Section 5: Certification Information

Checking these boxes certifies that the appropriate agency has reviewed and approved the settlement agreement.

The PD-14 has been reviewed and approved by the Office of State Controller, if needed. *

Select

The settlement has been reviewed and approved by the State Health Plan. *

Select

Section 6: Document Uploads

A copy of the PD-14, decision, agreement, order or any other supporting documentation must be attached to this form.

File Upload *

Drag and drop files here or [browse files](#)

- **Section Six:** Upload all documents related to the case (notarized PD-14, decision, agreement, order, or any other supporting documentation).
 - After a document is uploaded, the title will appear under “File Upload.”

Section 6: Document Uploads

A copy of the PD-14, decision, agreement, order or any other supporting documentation must be attached to this form.

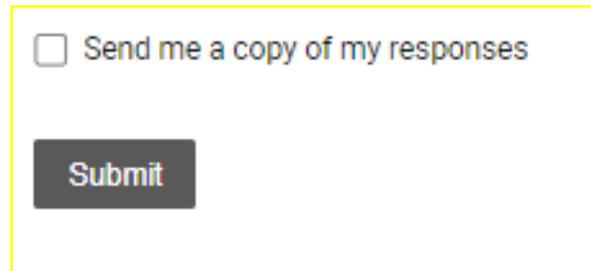
File Upload *

 JohnDoeCoverPage.docx

 JohnDoePD14.doc

 Sample PD-14.pdf

- Please review the document list to ensure all documents uploaded properly.
 - If you add a file in error, hover over file name and select the “X” that will appear to the right.
- Once you have completed all fields, check the box marked “Send me a copy of my responses” and then select Submit. This will send a copy to OSHR and to each party listed in Section one.



Send me a copy of my responses

Submit