

**Michigan State University  
NOTICE OF SUSPENSION PENDING INVESTIGATION**

<b>Employee</b>	<b>Classification</b>	<b>MSU employment date</b>
<b>Supervisor</b>	<b>Title</b>	<b>Department</b>

You are being suspended without pay pending investigation starting on \_\_\_\_\_ (date) at \_\_\_\_\_ (time)

**Reason**

You will be contacted at your address/telephone of record when the investigation has been completed.

**Check all of the following that apply:**

- Employee asked to be represented by his/her Union or Association representative  yes  no
- Supervisor advised employee that Union or Association representative may be present  yes  no
- Employee declined to have a Union or Association representative present  yes  no
- Union or Association representative(s) was(were) present  yes  no

**If yes:**

Name	Union/Association
Name	Union/Association

**SIGNATURES:**

\_\_\_\_\_  
Employee date

\_\_\_\_\_  
Supervisor date

Employee declined to sign

\_\_\_\_\_  
Employer representative date

\_\_\_\_\_  
Union/Association representative date

\_\_\_\_\_  
Union/Association representative date

**A copy of this form will be placed in the employee's official personnel folder.**

*MSU is an affirmative action, equal opportunity employer.*

Distribution of copies:  
1 copy to employee  
1 copy to department  
1 copy to Union/Association  
1 copy to Employee Records  
1 copy to Employee Relations