

City Service Commission APPEAL OF DISCIPLINARY ACTION FORM

Pursuant to Rule XIV (Discharge, Appeal, Hearing), Section 2 of the Rules of the Board of City Service Commissioners (the Commission), a regularly appointed employee who has passed his/her probationary period may appeal a discharge, reduction (involuntary demotion), a second suspension within six months of a former one or any suspension exceeding fifteen working days in length. The time limit to file an appeal ends at 4:45 p.m. on the third business day following receipt of written notification of the disciplinary action. An appeal is filed when it is received and time-stamped by the Department of Employee Relations on behalf of the Commission. The Department of Employee Relations is located at City Hall, 200 East Wells Street, Room 706, Milwaukee, WI 53202-3515. An appeal may also be filed by electronic transmission to the following email address: <u>elmoor@milwaukee.gov</u> by FAX to the following number: (414) 286-0203, Attention: Elizabeth Moore.

Appellants are encouraged to review the **Guidelines for Disciplinary Appeals to the City Service Commission** located at: <u>http://city.milwaukee.gov/der/csc/FormsDocs</u>

Please complete the form below to appeal a qualifying disciplinary action.

I appeal the following disciplinary action, pursuant to Rule XIV, Section 2 of the Rules of the Board of City Service Commissioners *(check one)*:

- Discharge
- X Reduction in classification (involuntary demotion)
- Second suspension within six months of a former one (Date of 1st suspension: _____)
- Suspension exceeding 15 days

I received written notification of the disciplinary action that I am appealing on: $\frac{2/8/24}{1}$. Please attach the disciplinary notice for the action that you are appealing. Please attach a brief statement indicating the basis of your appeal.

This appeal is dated this <u>12th</u> day of <u>February</u>, 20 ²⁴.

Signature of appellant:

	Jeanette McKnight	
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Name of appellant (please print):	Jeanette McKnight	
Appellant's Department/Division:	Communicable Disease	
Appellant will be represented by:	William Wetzel, Cross Law Firm, S.C.	
Contact information (phone number): (email address):	Phone:414-224-0000Email:wetzel@crosslawfirm.com	
Appellant's Contact Information:		
Primary phone number:	414-791-9976	
Address:	4741 N 40th St, Milwaukee WI 53209	
Email:	jmcknight2432@att.net	

Please write a brief statement indicating the basis of your appeal (attach to Form):

Ms. McKnight writes to appeal her demotion from Program Assistant II to Office Assistance II pursuant to the Disciplinary Reduction Notice dated February 8, 2024. Ms. McKnight appeals because the demotion was based on incorrect or incomplete information. She did not violate City of Milwaukee Work Rules or departmental policies or procedures. She did not falsify (or make unauthorized modification or alteration of) any city record or report. Ms. McKnight's work record demonstrates that she has a long history of good work for the City of Milwaukee. Demoting her is disproportionate to the alleged Work Rule violations. Further, no actual work rule violations occurred. As such, Ms. McKnight appeals her demotion.