

# THE COUNTY OF MILWAUKEE

## WRITTEN CHARGES AGAINST CIVIL SERVICE EMPLOYEES

(To be sent to the Milwaukee County Personnel Review Board in Duplicate)

\_\_\_\_\_  
(ORIGINATING DEPARTMENT, COMMISSION, BOARD OR INSTITUTION)

\_\_\_\_\_  
(Org. Unit Number)

\_\_\_\_\_  
(Date of Issuance)

**TO: MILWAUKEE COUNTY PERSONNEL REVIEW BOARD**

**COURTHOUSE ROOM 212-F**

**DEPARTMENT OF HUMAN RESOURCES**

**COURTHOUSE ROOM 210**

I hereby make the following written charges against \_\_\_\_\_  
(NAME OF EMPLOYEE) (CERIDIAN NUMBER)

as cause for \_\_\_\_\_ demotion from the position of \_\_\_\_\_  
(his/her) (OFFICIAL CIVIL SERVICE TITLE)

in the \_\_\_\_\_ and request that the  
(DIVISION, DEPARTMENT, COMMISSION, BOARD OR INSTITUTION) (ORG. UNIT NUMBER)

same be set for hearing before the Milwaukee County Personnel Review Board, and the proper action be taken thereon in accordance with the provisions of Sec. 63.10, Stats., Chapter 33 of the County General Ordinances and the rules of the Personnel Review Board.

### CHARGES

General: I charge that \_\_\_\_\_ has violated Paragraphs \_\_\_\_\_  
(NAME OF EMPLOYEE)

and \_\_\_\_\_ of Section 4, Rule VII, of the Milwaukee County Civil Service Commission in that Specific: On or about the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_:  
(NAME OF EMPLOYEE)

(Describe the incident(s) on which the charge(s) is/are based:

Recommended by \_\_\_\_\_  
(Name and Title of Superior Officer)

\_\_\_\_\_  
(SIGNATURE OF APPOINTING AUTHORITY)

#### FORM DISTRIBUTION:

WHITE & YELLOW COPY TO PERSONNEL REVIEW BOARD  
GREEN COPY TO DEPARTMENT OF HUMAN RESOURCES  
PINK COPY RETAINED BY APPOINTING AUTHORITY  
NO BLUE COPY

\_\_\_\_\_  
(OFFICIAL TITLE)

***MUST BE IN THE PRB OFFICE WITHIN 3 DAYS OF ISSUANCE***