



# CITY OF LITTLE ROCK

Distribution  
White Human Resources  
Yellow Dept.  
Pink Employee

## HUMAN RESOURCES DEPARTMENT

500 W. Markham - Suite 130W - Little Rock, Arkansas 72201-1428  
(501) 371-4590 λ FAX (501) 371-4496

### DISCIPLINARY ACTION APPEAL HEARING REQUEST FOR NON-UNIFORM EMPLOYEES

To request a disciplinary action appeal hearing, please complete this form and submit it to the Human Resources Department.

I, \_\_\_\_\_, request a hearing to appeal the following  
(Employee Name)  
disciplinary action:

- Written Reprimand (AFSCME only)
- Demotion
- Suspension
- Termination

Date Disciplinary Action Was Received: \_\_\_\_\_

A copy of the disciplinary action is / is not attached.  
(circle one)

Employee's Home Address: \_\_\_\_\_

Employee's Home Telephone Number: \_\_\_\_\_

Employee's Email Address: \_\_\_\_\_

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

**NOTE TO EMPLOYEE REQUESTING APPEAL:** You have the right to review all material the Department used to base their decision to take this action against you and receive a list of witnesses to be called at the hearing. The department has three days to provide this material to you after you file this request for an appeal. The department will contact you when the information is ready to be picked up. The information can only be picked up by you. You will have to sign a statement designating receipt of materials.

#### FOR HUMAN RESOURCES DEPARTMENT USE ONLY:

\_\_\_\_\_  
Date and Time Received

\_\_\_\_\_  
Received By

A hearing has been scheduled for \_\_\_\_\_ at \_\_\_\_\_ o'clock.