

**CITY OF OMAHA, NEBRASKA  
REPRIMAND**

TO: \_\_\_\_\_ CLASSIFICATION: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ DIVISION: \_\_\_\_\_

**You are officially reprimanded for:**

*(State date of occurrence and section of Union contract or Chapter 23 violated.)*

\_\_\_\_\_  
*(Department Head)*

\_\_\_\_\_  
*(Labor Relations Director)*

\_\_\_\_\_  
*(Supervisor)*

\_\_\_\_\_  
*(Title)*

I, \_\_\_\_\_ hereby acknowledge that I received a copy of the  
above reprimand from \_\_\_\_\_ *(Supervisor)* on \_\_\_\_\_ *(date)*.

My signature does not imply agreement with the facts recited herein.

\_\_\_\_\_  
*(Employee Signature)*

\_\_\_\_\_  
*(Supervisor Signature)*

**Employee comments, if desired:**

**After a copy is delivered to the employee, the Supervisor must distribute the original of this reprimand to the Human Resources Department Director, and copies to the Department Head, Labor Relations Director, and HR Records Division.**