

Jerrel Kruschke, P.E. Commissioner of Public Works

Dan Thomas, M.P.A., J.D. Director of Administrative Services

# Department of Public Works Administration

April 10, 2024

The Board Civil Service Commission City Hall Room 706 200 E. Wells Street Milwaukee, WI 53202

Re: Request for Reinstatement: Tranberg, Troy

Dear Commissioners,

I am writing to inform you of the Department's position regarding the reinstatement of Troy Tranberg.

The Department of Public Works <u>is</u> in support of Troy Tranberg's reinstatement to the title of Equipment and Tool Mechanic III (formerly Equipment Mechanic III).

If you have any questions, please contact me at 414-286-3307.

Sincerely,

—Docusigned by:

Dan Thomas

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Dan Thomas, M.P.A., J.D.
DPW Administrative Services Director

C: Kaylyn Jennik Makisha Porter Dan Thomas Shannon Goodwin Joshua Stratton File



## APPLICATION FOR REINSTATEMENT TO

Dept. of Employee Relations Room 706, City Hall 200 E. Wells St. Milwaukee, WI 53202-3554 (414) 286-3751 TDD (414) 286-2960 www.milwaukee.gov/jobs

#### INSTRUCTIONS TO APPLICANT:

- 1. Please PRINT answers in black ink (for copying purposes).
- 2. Answer all questions. Credit may NOT be given for incomplete information.
- 3. DATE and SIGN on page 4.
- 4. Keep a copy of completed application materials for your files.

Tona				1PER 1	S. 1
Name Last <u>T</u>	anberg	F	irst Troy	Mic	Idle Initial) <u>M</u>
List any other na	mes by which yo	u have been kno	wn on official re	ecords:	
Diago list the follo	uring information	a chart rough prov	rious omployme	nt with the City of Milv	vovleo.
riease nst the jono	wing intermation	rabout your prev	nous employme	an what the City of Min	vaukee:
POSITION TITLE	DEPARTMENT	EMP	LOYEE ID#	FROM (MO./	YR.) TO (MO./YR.)
Equipment	Mechanic 3	OPW Forestry	026054	July 2015 to	Feb. 2021
OPEN RECORDS/PUBLIC INFORMATION  The City sometimes receives requests under the Wisconsin Public Records Law for the identity of job applicants and copies of the job applications. However, except for those applicants who are final candidates for positions, the City is prohibited from releasing the identity of applicants who have indicated in writing that they do not wish their identity to be revealed.					
Do you wish to reveal your identity? Yes NoX					
In accordance with the Immigration Reform Control Act of 1986, the City will employ only persons legally authorized to work in the United States. Employment, offered, is conditional upon the individual's ability to establish verification of identity and authorization to work within three business days of commencement of employment.					
Are you able to provide documentation that demonstrates that you are legally authorized to work in the United States?  Yes X No					

Do you have relatives working for the City of Milwaukee? If Yes, list names, relationship and Department/Agency Due to limitations on employment of relatives, list the names and exact relationships of any relatives who are City of Milwaukee employees
Yes NoX
EDUCATION AND TRAINING
Did you graduate from High School? [X] Yes [] No If Yes, List High School Name, Address, City and State Wisconsin Lukeun High School 330 Glenv; ew Ave. Milw. WI 为以3
If you did not graduate from high school, do you have a General Education Development Certificate (GED) or a High School Proficiency Certification? Yes No If Yes, enter date issued and certificate number:
Training beyond high school (college or university, nursing, business college, military or other training you have received).  Under credits earned, indicate Q for quarter hours or S for semester hours.
NAME, CITY & STATE MAJOR/MINOR COURSE OF STUDY DATES OF ATTENDANCE DEGREE FURSUED #OF CREDITS/DATE GRADUATED
LICENSES & CERTIFICATIONS  Related to or required by the position for which you are applying. Do you have any current
occupational and professional licenses and certificates? YESNO _X
LICENSE/CERTIFICATE TYPE ISSUING AGENCY/BOARD SERIAL #

## **EMPLOYMENT HISTORY**

Begin with current or most recent employment and work back. Account for all time during the past ten years, including periods of unemployment. IN ADDITION, LIST ANY OTHER PAID OR UNPAID WORK					
EXPERIENCE THAT MAY QUALIFY YOU FOR A POSITION.					
NECESSARY.	From (month/year): Feb 2021				
Employer	From (month/year): Feh 2021				
City of M New Berlin	To (month/year): Present				
Address					
3805 S. Cusper Dr. NewBerlin WI 53151					
Your Title	☐ Part time 💢 Full time				
Crewleader	Hours per week: 40				
Supervisor's Name, Title and Phone Number	Reasons for leaving:				
Josh Radomski DPW Director 262-780-4609	Inswance				
Duties: In change of crew out in the field; of	Perater Heavy Equipment, Plan jobs.				
Reflace asphalt, concretes and Culverts					
Employer	From (month/year): July 2015				
city of Milwankee	To (month/year): Feb, 2021				
Address 5230 W. State Street Milw. UI					
Suss as spare speeds the total					
Your Title	☐ Part time 🛛 Full time				
Equipment Muchanic 3	Part time X Full time Hours per week:				
Supervisor's Name, Title and Phone Number	Reasons for leaving:				
Scott Miller Shop Manager 414-286-3855	Try something and different				
Duties: Maintonave on two cycle equipment, Lawn Mowers, front and loaders, and trailers					
Duties: Mintenace on two cycle equipment, Lawn Mowers, front and londers, and trailers ferform Mintenace on two cycle equipment, Lawn Mowers, front and londers, and trailers Fubricate and Weld, Parts research, Chipper Maintenance, Field Service					
Employer	From (month/year): April 2014				
Coello and Associates	To (month/year): July 2015				
Address	7				
alaa S. WestAve. Wantesha WI					
Your Title	Part time X Full time				
Laborer	Hours per week: 40 +				
Supervisor's Name, Title and Phone Number	Reasons for leaving:				
Scott Foreman	Needed more Fumily time				
Duties: Train new employees, read blue prints, install footing and foundations according					
to blue prints, operate crune and conveyer trucks					

READ CAREFULLY BEFORE SIGNING — I certify that all answers to questions on this application are true and complete. I understand that falsification of this application may result in disqualification or removal from a City position. I authorize the City to make any inquiries about and receive any information about my suitability for employment. I give permission to persons contacted to provide such information. Such inquiries may include, but are not limited to the quality and quantity of my work, work record, qualifications, education and criminal records as defined above.

NOTE: Convictions are not an automatic bar to employment but are reviewed in relation to the job for which you applied. I forever waive, release and covenant not to sue any person or organization as a result of providing, obtaining or acting upon such information. I understand that such information is sought with confidentiality. A copy of this authorization shall be effective as the original.

SIGNATURE Fy 97

DATE: 4-9-24



### Department of Employee Relations 200 E. Wells Street, Room 706 Milwaukee, WI 53202-3554

#### **REQUEST FOR REINSTATEMENT**

Rule X, Section 8 of the City Service Rules allows individuals who resigned or took a voluntary demotion, and were in good standing with their department, to request reinstatement. Requests must be approved by the department to which the former employee wants to be reinstated. Requests made more than three years from the date of separation must also be approved by the City Service Commission. An employee may only be appointed by reinstatement twice.

Applicants for reinstatement must submit this form and a Reinstatement Request Application to the Department of Employee Relations. Both documents are required in order to be considered for reinstatement.

Applicants are notified when a request is approved or denied. If approved, and the position previously held is currently vacant with an intent by the department to fill it, the individual has rights to that position. If an appropriate vacancy does not exist, the individual's name is placed on a reinstatement list for that title, and sent notices for interviews as other vacancies occur. Reinstatement lists are active for two years, but may be extended by the City Service Commission. Candidates being considered for placement via reinstatement will be subject to a conviction record review and satisfactory completion of a pre-placement testing, if required.

At the time of reappointment, the individual shall receive salary, service credit towards benefits, and job class seniority. Job class seniority is determined by City Service Rules. The CSC policy on reinstatement does not address employee's ERS contributions or benefits. Employees who are reinstated must contact the Employes' Retirement System directly in regard to their pension contributions or benefits.

Benefits Restored Upon Reinstatement			
Salary	Same salary as at time of resignation or to the minimum of the pay range, whichever is greater.		
Service Credit Toward Vacation Accrual	Service credit is adjusted to reflect the absence from service.		
Service Credit Toward Job Class Seniority	Job class seniority is adjusted to reflect the absence from service.		
Sick Leave Balance	Restored to balance at time of resignation.		

WHEN REQUESTING REINSTATEMENT, YOU MUST PROVIDE THE FOLLOWING INFORMATION (type or print legibly):

Name: Truy Tranberg

Employee ID: 026054 Date of Separation from Service:

Reinstatement to which Department & Division: Of w Forestry

Reinstatement to which Job Title: Equipment & Division Where Last Employed: Of w Forestry

I have read and understand the information above. I am requesting that my name be placed on the reinstatement list for the Job Title listed above.

Signature

Date

YOU MUST ATTACH A COMPLETED REINSTATEMENT APPLICATION TO THIS REQUEST ALL REINSTATEMENT REQUESTS MUST BE SENT TO DERCertification@Milwaukee.gov.