



Department of City Development
City Plan Commission
Redevelopment Authority of the City of Milwaukee
Neighborhood Improvement Development Corporation

Lafayette L. Crump
Commissioner

Vanessa L. Koster
Deputy Commissioner

November 18, 2024

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

RE: Reinstatement Request – Larry Kilmer

Dear Commissioners:

A request has been received from Larry Kilmer to be granted reinstatement to the position of Housing Rehabilitation Manager in the Department of City Development (DCD). Mr. Kilmer was employed by DCD from August, 2013, to May, 2021, when he resigned. He served DCD as a Housing Rehabilitation Manager from 2013 to 2015 and Housing Programs Manager from 2015 to 2021. Prior to his resignation, Mr. Kilmer was an employee in good standing and his work record was satisfactory. The department is in support of the request of Mr. Kilmer to be reinstated to his previous title of Housing Rehabilitation Manager.

Should you have any questions or require additional information, please contact Vanessa Armstrong at extension 6076.

Sincerely,

Vanessa L. Koster
Deputy Commissioner

cc: Vanessa Armstrong, DCD





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 Employees' 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:

Address

Phone No.

Employee ID

Reinstatement to which Department & Division:

Reinstatement to which Job Title:

Department & Division Where Last Employed:

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.

Larry Kilmer, AA

Signature

Date

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



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.

Name Last Kilmer, II First Larry Middle Initial) A

Address [REDACTED]

City [REDACTED]

Day phone [REDACTED]

Cell phone [REDACTED]

List any other names by which you have been known on official records:

Larry Kilmer

Please list the following information about your previous employment with the City of Milwaukee:

POSITION TITLE	DEPARTMENT	EMPLOYEE ID #	FROM (MO./YR.)	TO (MO./YR.)
Housing Programs Manager	City Development	024071	Aug/2013	April/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 ☐ No ☒

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 ☒ 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 ☐ No ☒

EDUCATION AND TRAINING

Did you graduate from High School? ☒ Yes ☐ No

If Yes, List High School Name, Address, City and State New Berlin West, 18695 W. Cleveland Ave., New Berlin, WI

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 PURSUED	# OF CREDITS/DATE GRADUATED
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UW-Milwaukee, Milwaukee, WI	Architecture	09/2001 to 05/2005	Bachelor of Science	May 2005
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UW-Milwaukee, Milwaukee, WI	Architecture + Urban Planning	09/2006 to 05/2009	MArch + MUP	May 2009
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UW-Milwaukee, Milwaukee, WI	Urban Studies	09/2019 to Present	PhD.	Anticipated Dec 2025/May 2026
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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? YES ☒ NO ☐

Housing Development Finance Professional	National Development Council	0417-001
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. ATTACH ADDITIONAL PAGES IF NECESSARY.

Employer City of Madison	From (month/year): <u>05/2021</u> To (month/year): <u>11/2024</u>
Address 215 Martin Luther King Jr. Blvd Suite 161, Madison, WI 53702	
Your Title Deputy Director, Community Development Authority	<input type="checkbox"/> Part time <input checked="" type="checkbox"/> Full time Hours per week: <u>38.75</u>
Supervisor's Name, Title and Phone Number Matthew Wachter - Director, Department of Planning, Community and Economic Development	Reasons for leaving: Returning to the City of Milwaukee
Duties: Oversee: Staff of 55, administration of 2,300 housing choice vouchers, management of 1,000+ housing units, redevelopment activities including affordable housing development, annual operating budget of \$30mm	
Employer City of Milwaukee	From (month/year): <u>04/2015</u> To (month/year): <u>04/2021</u>
Address 809 N. Broadway, Milwaukee, WI 53202	
Your Title Housing Programs Manager	<input type="checkbox"/> Part time <input checked="" type="checkbox"/> Full time Hours per week: <u>40</u>
Supervisor's Name, Title and Phone Number Maria Prioletta, Redevelopment and Special Projects Manager, Retired	Reasons for leaving: Opportunity to lead the Madison Public Housing Authority
Duties: Oversaw: Staff of 15, administration of housing rehabilitation loan programs and homeownership initiatives, staff NIDC Board of Directors meetings	
Employer City of Milwaukee	From (month/year): <u>09/2013</u> To (month/year): <u>04/2015</u>
Address 809 N. Broadway, Milwaukee, WI 53202	
Your Title Housing Rehabilitation Manager	<input type="checkbox"/> Part time <input checked="" type="checkbox"/> Full time Hours per week: <u>40</u>
Supervisor's Name, Title and Phone Number Sam Leichtling, Housing Programs Manager, 414 286 5714	Reasons for leaving: Internal Promotion
Duties: Oversaw: Staff of 10, caseload assignments, loan reviews, contractor payment approvals, scope of work review/approvals	

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 Larry Kilmer, AA

DATE: 11/14/2024