



Department of Public Works
Administration

January 29, 2025

Jerrel Kruschke, P.E.
Commissioner of Public Works

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

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

Re: Request for Reinstatement: Hargrove, Isiah

Dear Commissioners,

I am writing to inform you of the Department's position regarding the reinstatement of Isiah Hargrove.

The Department of Public Works is in support of Isiah Hargrove's reinstatement to the title of Equipment Operator I (Operations Driver/Worker).

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

Sincerely,

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

C: Makisha Porter
Dan Thomas
Joshua Stratton
File



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 employees who resigned or took a voluntary separation, and were in good standing with the department to request reinstatement. Requests must be approved by the department to which the former employee wants to be reinstated. Requests made more than one year from resignation 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 along with a Reinstatement Request Application to the Department of Employee Relations. Both documents are required 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 is placed on a reinstatement list, 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 criminal conviction record review and satisfactory completion of a pre placement medical examination and drug screen.

At the time of re-hire the individual shall receive salary, service credit towards benefits, and job class seniority according to the table below. 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 regards to their pension contributions or benefits.*

Benefits Restored Upon Reinstatement	When Reinstated Within Three Years of Resignation	When Reinstated Three or More Years after Resignation
Salary	Same salary as at time of resignation or to the minimum of the pay range, whichever is greater.	Same salary as at time of resignation or to the minimum of the pay range, whichever is greater.
Service Credit Towards Vacation Accrual	Service credit is adjusted to reflect the absence from service.	No prior service credit granted
Service Credit Towards Job Class Seniority	Job class seniority is adjusted to reflect the absence from service.	No prior service credit granted
Sick Leave Balance	Restored to balance at time of resignation	No sick leave balance is restored

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

Name: Tsiah Hargrove



Employee ID: 022593 Date of Separation From Service: 10/2020

Reinstatement to which Department & Division: Sanitation / DPW

Reinstatement to which Job Title: Equipment Operator I

Department & Division Where Last Employed: Sanitation / DPW

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.

Tsiah Hargrove 1/27/2025
 Signature Date

YOU MUST ATTACH A COMPLETED REINSTATEMENT APPLICATION TO THIS REQUEST



APPLICATION FOR REINSTATEMENT TO

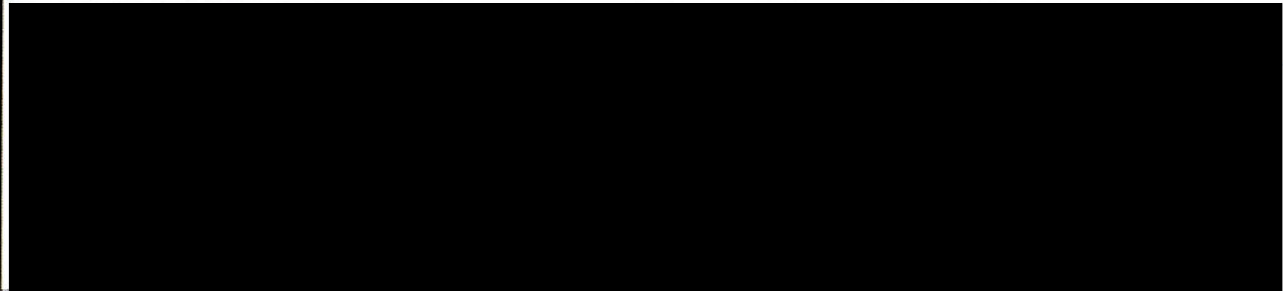
Dept. of Employee Relations
Room 706, City Hall
200 E. Wells St.
Milwaukee, WI 53202-3554
(414) 286-3751
TDD (414) 286-2960
www.milwaukee.gov/jobs

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.

Continue

Name Last Hargrove First Isiah Middle Initial) G



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

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.)
SEO	PDW		07/2012	10/2020

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

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 Nashville Police Academy	From (month/year): <u>05/2024</u> To (month/year): <u>01/2025</u>
Address 2715 Tucker Road Nashville TN 37218	
Your Title police officer trainee	<input type="checkbox"/> Part time <input checked="" type="checkbox"/> Full time Hours per week: <u>40</u>
Supervisor's Name, Title and Phone Number Miles Posey 615-582-1770	Reasons for leaving: Academy Completed, Moving back to WI
Duties: Learning the fundamentals of Law enforcement	
Employer Allegiance Crane	From (month/year): <u>08/2023</u> To (month/year): <u>05/2024</u>
Address 1770 Benchmark Ave, Fort Myers, FL 33905	
Your Title crane operator	<input type="checkbox"/> Part time <input checked="" type="checkbox"/> Full time Hours per week: <u>50</u>
Supervisor's Name, Title and Phone Number Jerry 863-517-5788	Reasons for leaving: To go to school/academy
Duties: Operated mobile cranes to lift, move, and place materials on various job sites.	
Employer Top Golf	From (month/year): <u>01/2022</u> To (month/year): <u>08/2022</u>
Address 8750 N Central Expy #1200, Dallas, TX 75231	
Your Title crane operator	<input type="checkbox"/> Part time <input checked="" type="checkbox"/> Full time Hours per week: <u>55-60</u>
Supervisor's Name, Title and Phone Number Stephen	Reasons for leaving: Was a traveling job, was only home 5 days out of the month
Duties: Operated cranes to facilitate the movement of materials and equipment throughout the facility.	

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 Isiah Hargrove

DATE: 1/27/2025

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 Menomonee Falls High N72 w13945, Menomonee falls WI, 53051

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

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

Crane Certified NCCO 555355753

LICENSE/CERTIFICATE TYPE	ISSUING AGENCY/BOARD	SERIAL #
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