

Department of Public Works Administration

January 6, 2021

Makda Fessahaye Employee Relations Director City Hall, Room 706 200 E. Wells Street Milwaukee, WI 53202

Re: Request for Reinstatement: McKinley Jr., James

Jeffrey S. Polenske, P.E. Commissioner of Public Works Dan Thomas, M.P.A., J.D. Director of Administrative Services

Dear Ms. Fessahaye,

I am writing to inform you of the Department's position regarding the reinstatement of James McKinley Jr.

The Department of Public Works *is* in support of Mr. McKinley's reinstatement to the title of Operations Driver/Worker.

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

Sincerely,

DocuSigned by: omas

FA7CE1AF35AD4CA... Dan Thomas, M.P.A., J.D. DPW Administrative Services Director

Rick Meyers Kaylyn Jennik Shannon Goodwin Andrew Simons File

C:



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 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 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. <u>Both documents are required to be considered for reinstatement.</u>

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 Employes' 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	Same salary as at time of resignation or to	
	the minimum of the pay range, whichever is	the minimum of the pay range, whichever is	
	greater.	greater.	
Service Credit Towards	Service credit is adjusted to reflect the	No prior service credit granted	
Vacation Accrual	absence from service.	,	
Service Credit Towards Job	Job class seniority is adjusted to reflect the	No prior service credit granted	
Class Seniority	absence from service.	in prior service el cuit grunted	
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: Dames	E. MCKINLEN JR. 1.
Address:	Zip Code:
Phone No.:	Email:
Employee ID:	Date of Separation From Service:
Reinstatement to which Departme	ent & Division: Sanitation Department
Reinstatement to which Job Title:	Sanitation Worker
Department & Division Where Las	
I have read and understand the inform	ation above. I am requesting that my name be placed on the reinstatement list
for the Job Title listed above.	Stalla 12-13-21
Signoture	Date
YOU MUST ATTACH	A COMPLETED REINSTATEMENT APPLICATION TO THIS REQUEST
	<i>R. 12/13</i>

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

City, State, Zip Cod	6		
Day phone: (SAME	Evening phone: ()	same
Cell phone:		Email Address:	
Do you gurronth	y live in the city of Milwa	ukee? Yes No	
		ukee? <u> </u>	
When did you beco	me a resident? (month/year) _		
List any other name	es by which you have been kno	wn on official records:	
	NH		
Are you 18 years of	age or older? ∰ Yes □ No	If under 18, how old are yo	u?
Due to limitations on	employment of relatives list the n	ames and exact relationships of any re	years months
Milwaukee employee	s: NA	and exact relationships of any re	latives who are City of
List any licenses, re	gistrations and/or certificates	you possess, such as Driver's, Nurs	ing or Professional
IIIE NO	VIDER (II any)	TYPE NU	MBER (if any)
	EDUCATI	ON AND TRAINING	
	rade or year completed in scho om High School? 🗖 Yes 🛛		10 11 12
	ocation of High School	nnº Foster High Sc	hool PA
Have you passed a	high school equivalency or G.E	D. Test? Yes No	
Training beyond high Under credits earned,	school (college or university, nurs indicate Q for quarter hours or S f	sing, business college, military or other for semester hours.	training you have received).
NAME AND LOCATION OF SCHOOL	FULL OR DATES ATTENDED PART TIME FROM TO MO. YR. MO. YR.	CREDITS MAJOR OR FIELDS OF EARNED	STUDY TYPE OF DEGREE/DATE COMPLETED

EMPLOYMENT HISTORY

Begin with current or most recent employment and work back including periods of unemployment. IN ADDITION, LIST A EXPERIENCE THAT MAY QUALIFY YOU FOR A POSITION NECESSARY.	NY OTHER PAID OR UNPAID WORK
Employer	From (month/year):
Trillium incking	To (month/year):
Address	Salary/Wage: \$25,00 per hour
Your Title	Part time Full time
Truck Driver	Hours per week: <u>40</u> +
Supervisor's Name, Title and Phone Number	Reasons for leaving:
CAVIL (414)455-6428	Still Working
Delivering products to va	nous business chuit
Employer	From (month/year): 2 2021
Tomac Indiction IIA	1770001
Address JUSTICS JUC	To (month/year): $10/10/1$ Salary/Wage: $22v50$ per NR
21355. Danny Rd NewBer	141.15153146
Your Fitle	Part time Full time
Inick Driver	Hours per week: 40 +
Supervisor's Name, Title and Phone Number	Reasons for leaving:
HIISON MOUTON 601-395	1819 Better Oppoting
AND THIMMS.	ious busineses in WI
Employer	From (month/year):
MCTS	To (month/year): 2/2021
Address 777	Salary/Wage: \$_21000_per_1/
1942 N. IT STPPET MIN	W153705
Your Title	Part time Full time
pus priver	Hours per week:
Supervisor's Name, Title and Phone Number	Reasons for leaving:
Jeff (414) 344-4550	B Termination
Driving the passingers to	and from their
	ULX U WULLONG

Employment History Snap on Tools 4/2013-9/2015 7939 N. Faulkner Rd Milwauhee, WI 53224 877-762-76664 Supervisor: mark Passe Duties: Delivering products and materials to customers pusinesses. in the city. Argus Technical Services 7/2011-12/2012. 2835 N. Mayfair Rd. Wauwatosa, WI 53222 (AA) 794-5996 Supervisor: Don't remember Duties: van dis jobs throughout the

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.		
If you do not wish us to reveal your identity, please check the following box:		
Are you legally authorized to work permanently for any employer within the United States? Yes \searrow No \Box		
There may be a possibility of employment with other organizations. If so, may we refer your name? Yes 📿 No 🙀		
Give the titles and dates of all City examinations you have taken within the last six months (if none, print "NONE"):		
NENE		
Please list the following information about your previous employment with the City of Milwaukee:		
Sanitation Worker Canal St 028620 2/2016-8/2020		
POSITION TITLE BEPARTMENT EMPLOYEE ID # FROM (MO./YR.) TO (MO./YR.)		

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 understand that residency in the City of Milwaukee within six months of appointment and throughout employment is required by City Charter 5-02*. 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.

DATE 12-13-21 SIGNATURE

*The City of Milwaukee's ability to continue enforcement of the residency requirement is currently in litigation. Please contact the Department of Employee Relations for specific questions regarding your situation.

City of Milwaukee

Supplementary Applicant Information

No applicant for employment shall be discriminated against because of race, color, creed, religion, sex, genetic testing, sexual orientation, marital status, membership in the military reserves, national origin, ancestry, age, arrest or non-job-related conviction record, non-job-related physical or mental disability, or the use or nonuse of lawful products off the employer's premises during nonworking hours.

Completion of this form is voluntary. We ask, however, for your cooperation in completing the following information. It will be treated confidentially and used only to help us monitor the City's Affirmative Action efforts and to comply with Federal recordkeeping requirements.

Your birthdate:

(Must be provided and will be used for conviction verification)

NOTE: Convictions are not an automatic bar to employment but are reviewed in relation to the job for which you applied.

PLF 1.	EASE PRINT OF THE INTERVIEW JAMES FIRST MIDDLE
2.	Sex (please check one): MALE FEMALE
3.	Race (please check one):
	Black/African American (not of Hispanic origin)
	Hispanic/Chicano/Puerto Rican/Mexican/Cuban/Central or South American
	White/Caucasian/European/North African/Middle Eastern (not of Hispanic origin)
	Native American Indian/Alaskan Native
	Asian American/Pacific Islander/Far Eastern/Indian subcontinent or Southeastern Asian (i.e., China, Japan, Korea, Philippine Islands, Samoa)
4.	List any languages, other than English, which you speak FLUENTLY: NA
5.	Certain Federal grant positions may require public housing development residency. Please complete the following it you are currently living in a City of Milwaukee public housing development. I live in the Housing Development.

The above completed information is true to the best of my knowledge.

SIGNATURE

DATE 12-13-21

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