



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. 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: Adrian G. Gbbs

Address: [REDACTED]

Zip Code: [REDACTED]

Phone No.: [REDACTED]

Email: [REDACTED]

Employee ID: 024704

Date of Separation From Service: 8-2017

Reinstatement to which Department & Division: Neighborhood Services

Reinstatement to which Job Title: Boiler Inspector

Department & Division Where Last Employed: Neighborhood Services

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 Cebuan

Date 10-25-2021

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 2.
4. Keep a copy of completed application materials for your files.

Name (Last, First, Middle Initial) <u>Gibbs, Adrian L</u>					
Address <u>[REDACTED]</u>					
City, State, Zip Code <u>[REDACTED]</u>					
Day phone: <u>[REDACTED]</u>	Evening phone: <u>() -</u>				
Cell phone: <u>() -</u>	Email Address: <u>[REDACTED]</u>				
Do you currently live in the city of Milwaukee? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
When did you become a resident? (month/year) <u>1973</u>					
List any other names by which you have been known on official records:					
Are you 18 years of age or older? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If under 18, how old are you? _____ years _____ months					
Due to limitations on employment of relatives, list the names and exact relationships of any relatives who are City of Milwaukee employees:					
List any licenses, registrations and/or certificates you possess, such as Driver's, Nursing or Professional Engineer, that are related to the job you are applying for:					
<u>Driver License</u> <u>[REDACTED]</u> TYPE NUMBER (if any)	<u>WI Boiler license</u> <u>[REDACTED]</u> TYPE NUMBER (if any)				
EDUCATION AND TRAINING					
Circle the highest grade or year completed in school: 1 2 3 4 5 6 7 8 9 10 11 <u>12</u>					
Did you graduate from High School? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
If Yes, Name and Location of High School <u>Milwaukee Tech</u> <u>Milwaukee, WI</u>					
Have you passed a high school equivalency or G.E.D. Test? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
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 AND LOCATION OF SCHOOL	FULL OR PART TIME	DATES ATTENDED FROM TO MO. YR. MO. YR.	CREDITS EARNED	MAJOR OR FIELDS OF STUDY	TYPE OF DEGREE/DATE COMPLETED
<u>Milwaukee Tech College</u>		<u>1991-2015</u>		<u>Applied Science + Tech</u>	<u>associates</u>
<u>Journeyman Boilermaker</u>		<u>2006-2012</u>		<u>Boilermaker</u>	<u>Journeyman</u>

2:48 PM

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 <u>State of Wisconsin</u>	From (month/year): <u>8-2020</u> To (month/year): <u>present</u>
Address <u>141 NW Barstow St</u>	Salary/Wage: \$ <u>25.00</u> per <u>hr.</u>
Your Title <u>Boiler/Pressure Vessel Inspector</u>	<input type="checkbox"/> Part time <input checked="" type="checkbox"/> Full time Hours per week: <u>40</u>
Supervisor's Name, Title and Phone Number <u>Kim Schmitt Section Chief 608-622-6587</u>	Reasons for leaving: <u>Presently Working</u>
Duties: <u>Boiler/Pressure Vessel Inspection's</u> <u>Code Enforcement</u> <u>Data Input</u>	
Employer <u>Saint Kate Hotel</u>	From (month/year): <u>1-2020</u> To (month/year): <u>3-2020</u>
Address <u>139 E Kilbourn Ave.</u> <u>Milwaukee, WI 53202</u>	Salary/Wage: \$ <u>23.00</u> per <u>hr</u>
Your Title <u>Maintenance</u>	<input type="checkbox"/> Part time <input checked="" type="checkbox"/> Full time Hours per week: _____
Supervisor's Name, Title and Phone Number <u>Chris Belcher 414-207-3444</u>	Reasons for leaving: <u>Lay-off Due to Covid-19</u>
Duties: <u>Facilities Maintenance</u>	
Employer <u>Travelers Insurance</u>	From (month/year): <u>8-2017</u> To (month/year): <u>8-2019</u>
Address <u>13935 Bishops Dr.</u> <u>Brookfield, WI</u>	Salary/Wage: \$ <u>83,000</u> per <u>year</u>
Your Title <u>Boiler Inspector/Risk Control</u>	<input type="checkbox"/> Part time <input checked="" type="checkbox"/> Full time Hours per week: <u>70-80</u>
Supervisor's Name, Title and Phone Number <u>Jeff Post Area Manager 816-522-3409</u>	Reasons for leaving: <u>Resigned</u>
Duties: <u>Boiler/Pressure Vessel Inspection's</u> <u>Risk Control</u> <u>Claim Investigation</u>	

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 ☒ No ☐

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"):

NONE

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.)
Boiler Inspector	Neighborhood Services	024704	8-2014 to 8-2017

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.

SIGNATURE Cedra P

DATE 10-21-21

*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: 11-12-1973 (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.

PLEASE PRINT OR TYPE

1. Name: Gibbs Adrian Lemond
LAST FIRST MIDDLE

2. Sex (please check one): MALE X 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**: _____

5. Certain Federal grant positions may require public housing development residency. Please complete the following if 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 Adrian P DATE 10-21-21

Biernat, Karen

From: Roberts, Erica
Sent: Monday, October 25, 2021 1:40 PM
To: Biernat, Karen
Cc: Burnell Jones, Sha'Nese
Subject: RE: Reinstatement Request

Yes, I support this request.

Erica R. Roberts

Commissioner of Building Inspection
841 N. Broadway, Room 104, Milwaukee, WI 53202
P: (414) 286-2543
errober@milwaukee.gov



From: Biernat, Karen <KLBIERN@milwaukee.gov>
Sent: Monday, October 25, 2021 12:12 PM
To: Roberts, Erica <errober@milwaukee.gov>
Cc: Burnell Jones, Sha'Nese <sburne@milwaukee.gov>
Subject: Reinstatement Request

Hello,

Please see the attached reinstatement request from Arian Gibbs, Boiler Inspector.

Please let me know by Friday, Oct. 29th if the department is in favor of reinstatement, and if agreeable, it will go on the next CSC agenda for 11/9/21.

Thank you,
Karen



Karen Biernat
Administrative Assistant Coordinator
Department of Employee Relations
City of Milwaukee

(o) 414.286.3398
klbiern@milwaukee.gov
200 E. Wells St. Rm 706
Milwaukee, WI 53202

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