

CITY OF EL PASO, TEXAS
DEPARTMENT HEAD'S SUMMARY REQUEST FOR COUNCIL ACTION (RCA)

DEPARTMENT: General Services

AGENDA DATE: 2/06/07

CONTACT PERSON/PHONE: General Services, Jeff Belles, (915) 621-6819

DISTRICT(S) AFFECTED: N/A

SUBJECT:

APPROVE: Reinstatement Request

BACKGROUND / DISCUSSION:

Employee resigned in good standing and meets all the requirements for reinstatement as per CSC Rules and Regulations.

PRIOR COUNCIL ACTION:

Has the Council previously considered this item or a closely related one? If so, when?

No

AMOUNT AND SOURCE OF FUNDING:

N/A

BOARD / COMMISSION ACTION:

Enter appropriate comments or N/A

As per Civil Service Commission approval on 01/25/07

*******REQUIRED AUTHORIZATION*******

LEGAL: (if required) _____

FINANCE: (if required) _____

OTHER: _____

(Example: if RCA is initiated by Purchasing, client department should sign also)

Information copy to appropriate Deputy City Manager

APPROVED FOR AGENDA:

CITY MANAGER: _____

DATE: _____

COMMISSIONERS:

Boureslan, Ali
Brannon, Edith
Gezelius, Ken
Graham, Elijah
Mosher, Fran
Reynolds, Thurman
Ruck, Lance E.
Schwartz, Elma
Scott, Valerie



CIVIL SERVICE COMMISSION

#2 Civic Center Plaza – 3rd Fl.
El Paso, TX 79901-1196

Telephone 541-4216
Fax 541-4220

MEMORANDUM

TO: Jeffrey Belles, Director
General Services

FROM: Linda Ball Thomas, Secretary
Civil Service Commission 

SUBJECT: Reinstatement Request
Michael Potts - Materials Specialist

DATE: January 9, 2007

May we have your comments regarding the attached request for reinstatement? In order to place this request on the agenda for the Civil Service Commission meeting of 1/25/07, we need your comments by 1/12/07.

Please call Laura Brown at 541-4082 if you have any questions. Thank you.

LBT/lb
Attachments

**SUPPLEMENTAL APPLICATION FORM #1
MISDEMEANOR AND FELONY CONVICTIONS**

Page _____ of _____

Please Print or Type

NAME: MICHAEL K POTTS SS # _____
 DATE: Jan 3, 2007 POSITION APPLYING FOR: Material Specialist

Criminal convictions do not automatically disqualify applicants. A criminal conviction will be considered only in relation to the job for which you are applying. Do not list successfully completed deferred adjudications. EACH OFFENSE MUST BE LISTED IN A SEPARATE BLOCK. Copy this form if you have more than two offenses.

Have you ever been CONVICTED of a misdemeanor? YES NO If Yes answer questions 1 - 5 for each conviction.
 Have you ever been CONVICTED of a felony offense? YES NO If Yes answer questions 1 - 5 for each conviction.
 If you answer NO to both questions listed above, sign and date this form then proceed to Supplemental Application Form #2 on reverse side of this form.

Block # _____

1. When were you charged/ticketed? _____ (month) _____ (year)
2. Where were you ticketed? _____ (City) _____ (State)
3. What were you charged with? _____
4. What was the outcome? Probation Starting _____ Finishing _____
 (month/year) (month/year)
 Jail or Prison Sentence: (Complete #5 below) Fine: \$ _____ (amount)
 Other Explain: _____
5. If you were sent to jail or prison:
 - a. When did you start your sentence? _____ (month) _____ (year)
 - b. What was the name and location of the jail or prison?
 Name: _____ Location: _____
 - c. When were you released? Paroled _____ Sentence Completed _____
 (month/year) (month/year)
 - d. If presently on parole, when will your parole finish? _____ (month/year)

Block # _____

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2. Where were you ticketed? _____ (City) _____ (State)
3. What were you charged with? _____
4. What was the outcome? Probation Starting _____ Finishing _____
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 Jail or Prison Sentence: (Complete #5 below) Fine: \$ _____ (amount)
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 - b. What was the name and location of the jail or prison?
 Name: _____ Location: _____
 - c. When were you released? Paroled _____ Sentence Completed _____
 (month/year) (month/year)
 - d. If presently on parole, when will your parole finish? _____ (month/year)

Signature:  Date: Jan 3, 2007

Turn over to complete Supplemental Application Form #2