#### Mechanicville Civil Service Commission Meeting Agenda June 7, 2023 4:00 p.m.

- 1) Roll Call
- 2) Approval of minutes of May 3, 2023
- 3) Communications
- 4) Report of Personnel Changes

#### Mechanicville School District

- a) Michael Cefferillo resigned as Monitor effective 5/1/23
- b) Cassandra Christiansen resigned as Teacher Aide effective 5/5/23
- c) Vanessa Fink was removed as Teacher Aide effective 5/19/23
- d) Kelly Guilliano was appointed as Permanent Teacher Aide effective 4/27/23
- e) David Krom resigned as Mechanic effective 5/3/23
- f) David Rose was appointed as Cleaner (L) effective 9/14/22
- g) David Rose received permanent promotion as Cleaner (L) effective 3/14/23
- h) Joseph Stewart was appointed as Cleaner (L) effective 9/14/22
- i) Joseph Stewart received permanent promotion as Cleaner (L) effective 3/14/23
- j) Meghan Warren was appointed as Permanent Chief Information Officer effective 5/3/23 from the Eligible List dated 5/3/23
- 5.) Old Business

NYSAPCSCO Conference update

6.) New Business

Police Officer Examination Announcement has been posted

Approve Change in Residence Requirement on Clerk Examination Announcement

- 7.) Appearances
- 8.) Next Meeting September 6, 2023
- 9.) Adjournment

From: C	City County County	Town 🗌	Village Or District ☑					
Department:								
Name And Title o	f Last Employee In Position:							
Name And Thie o	Last Employee in Position :							
Name of Employe	Name of Employee: Michael Cefferillo Social Security Number:							
	Michael Generalo							
Addr-		3						
Title of Position:	Monitor		Salary:					
Non-Veteran 🛛								
Appointments	Check Nature Of	Effective Date	Action Necessary By					
	Personnel Change		Appointing Officer					
	Permanent		Return Report of Certification					
	Provisional		Attach Application					
	Temporary	From To	State Length of Employment					
	For Term of Office	From To	Give Facts Under Remarks					
	Permanent Promotion	110111 10	Return Report of Certification					
	Provisional Promotion		Attach Nomination					
	☐ Non-Competitive Class		Attach Application					
	Exempt Class		Submit This Form Only					
	Labor Class		Attach Application					
Terminations	X Resignation	5/1/23	Submit Signed Resignation					
	Retirement	0.1720	Give Effective Date					
	Deceased		Indicate Date					
	Removal		Attach Copy of Proceedings					
	Layoff (lack of work or funds)		Give Facts Under Remarks					
Other Changes	Military Leave of Absence		Give Facts Under Remarks					
_	Other Leave of Absence	From To	Give Facts Under Remarks					
	Transfer		Give Facts Under Remarks					
	Demotion		Give Facts Under Remarks					
	Suspension		Give Facts Under Remarks					
	☐ Reinstatement		Give Facts Under Remarks					
	☐ Change in Classification		Give Facts Under Remarks					
	New Position		Submit Form					
	☐ Change in Salary		Indicate New Salary					
	Change in Name		Give Facts Under Remarks					
Other Give Facts Under Remarks								
Remarks:								
Appointing Officer	i lodi A Rirch	· ·	ECHANICVILLE CIVIL					
		S	ERVICE COMMISSION					
<sup>Title:</sup> Business M			DECENIED					
Address: 25 Kniskern Ave. Mechanicville, NY 12118								
Certificate valid until:								
This ce	rtifies that the above employment is in a							
<del>- /                                    </del>	Subject to any limita	tion or condition specified i	above.					
By: Welel	Buch		Date: / 5 / 2 / 23					

April 18, 2023

RECEIVED

BY: (8)

Mr. Kevin Kolakowski Superintendent Mechanicville School District 25 Kniskern Ave Mechanicville, NY 12118

Dear Mr. Kolakowski:

This letter shall serve as notification that I will be retiring from my position as Monitor. The effective date of my retirement will be May 1, 2023.

Thank you and I will see you soon!

Sincerely,

Muchal Ceffeeth

		<del></del>							
From: City County Town Village Or District					Pistrict 🛮				
Department:									
Name And Title	of Last E	Employee In Position :							
Name of Employ	yee: Cas	ssandra Christiansen			Social Secur	ity Numba			
Addr	***************************************	, modianovno, rei	^		L				
Title of Position:	: Teacl	ner Aide				Salary:			
Non-Veteran 🗸									
Appointments	<u>,                                     </u>	Check Nature Of		ective Date					
Appointments	1		Elle	ective Date	1	Action Necessary By			
	<u> </u>	Personnel Change				Appointing Officer			
		Permanent				Report of Certification			
		] Provisional				Application			
		Temporary	From	То	State Le	ength of Employment			
		For Term of Office	From	То	Give Fa	cts Under Remarks			
		Permanent Promotion			Return 1	Report of Certification			
	IT	Provisional Promotion			Attach 1	Nomination			
		Non-Competitive Class			Attach	Application			
		Exempt Class			Submit	This Form Only			
		Labor Class			Attach A	Application			
Terminations	[2	Resignation	5/5/23		Submit	Signed Resignation			
		Retirement				fective Date			
		Deceased	<u> </u>		Indicate	Date			
		Removal		······································	Attach (	Copy of Proceedings			
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			ļ			cts Under Remarks			
	- <del> -</del>	Change in Classification  New Position			Submit				
	- -	, _ , _ , , , , , , , , , , , , ,				New Salary			
		Change in Salary				cts Under Remarks			
	- -	Change in Name							
		Other	<u> </u>		Give Fa	cts Under Remarks			
Remarks: MECHANICVILLE CIVIL SERVICE COMMISSION									
Appointing Office	<sup>cer:</sup> Jod	A. Birch			DEC	EIVED			
Title: Business	Manage	er							
<sup>Address:</sup> 25 Kni			12118	ÇAT	E _3/2/2	3 N- Lindlmann			
Certificate valid until: Date:						Date:			
This	certifies	that the above employment is in a	accordance w	vith Law and R	tules made in above,				
Subject to any limitation or condition specified above.  By:  Date: 5/4/23									



Bornt, Beth <bbornt@mechanicville.org>

#### Fwd: Resignation - Cassandra Christiansen

1 message

Dieckmann, Don <ddieckmann@mechanicville.org>

Mon, Apr 24, 2023 at 4:09 PM

To: Catherine O'Brien <cobrien@mechanicville.org>, Kevin Kolakowski <kkolakowski@mechanicville.org>, Beth Bornt <br/> <box display="block">>bornt@mechanicville.org>, "Pisculli, Josephine" jpisculli@mechanicville.org>

FYI.

As we will probably be letting some of our aides go at the end of the school year, we will not be asking to post this position and will do our best to absorb this through our substitutes. Thank you. DD

----- Forwarded message -----

From: Christiansen, Cassandra <cchristiansen@mechanicville.org>

Date: Mon, Apr 24, 2023 at 2:21 PM

Subject: Resignation - Cassandra Christiansen

To: Don Dieckmann <ddieckmann@mechanicville.org>

Good afternoon,

After much thought and consideration I am resigning my position here at Mechanicville Elementary. I have been offered a position that is a promotion and moves me closer to my ultimate goal. My last day will be May 5, 2023.

I have really enjoyed my time here and I thank you for the opportunity.

Cassandra Christiansen

Donald J. Dieckmann, Jr.

Principal-Mechanicville Elementary School 25 Kniskern Ave. Mechanicville, NY 12118 (518) 664-7336 ddieckmann@mechanicville.org

		· ·			
From: City	☐ County ☐	Town	Village Or District   ✓		
Department:					
Name And Title of La	ast Employee In Position:				
Name of Employee:	/anessa Fink		Social Security Number: XX		
Address.	• •				
Title of Position:	TeacherAnde		Salary:		
Non-Veteran 🗸	Veteran Disabled \	/eteran Exe	mpt Volunteer Firefighter		
Appointments	Check Nature Of	Effective Date			
		Effective Date	Action Necessary By		
	Personnel Change		Appointing Officer		
	Permanent		Return Report of Certification		
	☐ Provisional		Attach Application		
,	Temporary	From To	State Length of Employment		
	☐ For Term of Office	From To	Give Facts Under Remarks		
	Permanent Promotion		Return Report of Certification		
	Provisional Promotion		Attach Nomination		
	☐ Non-Competitive Class		Attach Application		
	Exempt Class		Submit This Form Only		
	Labor Class	·	Attach Application		
Terminations	Resignation		Submit Signed Resignation		
	Retirement		Give Effective Date		
	Deceased		Indicate Date		
1	X Removal	5/19/23	Attach Copy of Proceedings N/A		
	Layoff (lack of work or funds)	0/ 10/20	Give Facts Under Remarks		
Other Changes	Military Leave of Absence		Give Facts Under Remarks		
	Other Leave of Absence	From To	Give Facts Under Remarks		
	Transfer	7.0	Give Facts Under Remarks		
	Demotion		Give Facts Under Remarks		
	Suspension		Give Facts Under Remarks		
	Reinstatement		Give Facts Under Remarks		
	Change in Classification		Give Facts Under Remarks		
	New Position		Submit Form		
}	☐ Change in Salary				
ŀ	Change in Name		Indicate New Salary Give Facts Under Remarks		
	Other		Give Facts Under Remarks		
Remarks:					
Remarks: ATD	I in reduction	ala nasin	ا الم		
	! in probation	ary peace	MECHANICALLE OVA		
Appointing Officer: J			MECHANICVILLE CIVIL SERVICE COMMISSION		
Title: Business Man	ager				
Address: 25 Kniskern Ave. Mechanicville, NY 12118					
Certificate valid until:  Date: K-Lindemann					
This certif	ies that the above employment is in a Subiect to any limita	accordance with Law and R tion or condition specified	Rules made in pursuance to Law.		
Ву:	0	or common specifical	Date:		
Challe	Derel		5/22/22		

Personal Charge   Town   Village Or District   Department:						
Name of Employee: Kelly Guiliano  Addre	From: City	County	Town	Village Or District 🔽		
Name of Employee: Kelly Guiliano   Social Security Num'	Department:	<del>, , , , , , , , , , , , , , , , , , , </del>				
Name of Employee: Kelly Guiliano   Social Security Num'	Name And Title of La	st Employee In Position:				
Title of Position: Teacher Aide	•					
Title of Position: Teacher Aide	Name of Employee:	Kelly Guiliano		Social Security Num		
Non-Veteran   Disabled Veteran   Exempt Volunteer Firefighter						
Non-Veteran   Disabled Veteran   Exempt Volunteer Firefighter	Title of Position: Tea			Salary:		
Appointments    Check Nature Of Personnel Change			/eteran D Even			
Personnel Change   Appointing Officer						
Permanent   4/27/23   Return Report of Certification     Provisional   Attach Application     Temporary   From To   State Length of Employment     For Term of Office   From To   Give Facts Under Remarks     Permanent Promotion   Return Report of Certification     Provisional Promotion   Attach Nomination     Non-Competitive Class   Attach Application     Exempt Class   Submit This Form Only     Labor Class   Attach Application     Resignation   Submit Signed Resignation     Retirement   Give Effective Date     Deceased   Indicate Date     Removal   Attach Copy of Proceedings     Layoff (lack of work or funds)   Give Facts Under Remarks     Military Leave of Absence   Give Facts Under Remarks     Other Changes   Military Leave of Absence   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Reinstatement   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     New Position   Submit Form     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other Change in Name   Give Facts Under Remarks     Change in Name   Give Facts Under Remarks     Other C	Appointments		Lifective Date			
Provisional   Promotion   Attach Application   Prom To   State Length of Employment   From To   Give Facts Under Remarks   Permanent Promotion   Return Report of Certification   Attach Nonination   Non-Competitive Class   Attach Application   Exempt Class   Attach Application   Exempt Class   Attach Application   Exempt Class   Attach Application   Submit This Form Only   Labor Class   Attach Application   Submit Signed Resignation   Give Effective Date   Indicate Date   Removal   Attach Copy of Proceedings   Give Facts Under Remarks   Give Facts Under		Personnel Change				
Temporary   From To   State Length of Employment   Por Term of Office   Prom To   Give Facts Under Remarks   Permanent Promotion   Return Report of Certification   Provisional Promotion   Attach Nomination   Attach Nomination   Attach Nomination   Date:   Date			4/27/23			
For Term of Office   From To   Give Facts Under Remarks   Permanent Promotion   Return Report of Certification   Attach Nomination   Non-Competitive Class   Attach Application   Attach Application   Exempt Class   Submit This Form Only   Attach Application   Resignation   Resignation   Submit Signed Resignation   Retirement   Give Effective Date   Indicate Date   Attach Copy of Proceedings   Layoff (lack of work or funds)   Give Facts Under Remarks   Give Facts Under Remarks   Other Changes   Military Leave of Absence   From To   Give Facts Under Remarks   Give Facts Under Remark						
Permanent Promotion			From To			
Provisional Promotion		For Term of Office	From To			
Non-Competitive Class   Attach Application		Permanent Promotion		Return Report of Certification		
Exempt Class   Submit This Form Only     Labor Class   Attach Application     Resignation   Submit Signed Resignation     Retirement   Give Effective Date     Deceased   Indicate Date     Removal   Attach Copy of Proceedings     Layoff (lack of work or funds)   Give Facts Under Remarks     Other Changes   Military Leave of Absence   Give Facts Under Remarks     Other Leave of Absence   From To   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Change in Name   Give Facts Under Remarks     Other   Give Facts		Provisional Promotion		Attach Nomination		
Labor Class		☐ Non-Competitive Class		Attach Application		
Resignation		Exempt Class		Submit This Form Only		
Retirement   Give Effective Date   Indicate New Facts Under Remarks   Indicate New Salary   Indicate N		Labor Class		Attach Application		
Retirement   Deceased   Indicate Date     Removal   Attach Copy of Proceedings     Layoff (lack of work or funds)   Give Facts Under Remarks     Other Changes   Military Leave of Absence   Give Facts Under Remarks     Other Leave of Absence   From To   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Remarks:   MECHANICVILLE CIVIL     Appointing Officer: Jodi A. Birch   SERVICE COMMISSION     Title: Business Manager   Address: 25 Kniskern Ave.   Mechanicville, NY 12118   DATE   Date:     This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.   Subject to any limitation or condition specified above.	Terminations	Resignation		Submit Signed Resignation		
Removal   Attach Copy of Proceedings     Layoff (lack of work or funds)   Give Facts Under Remarks     Other Changes   Military Leave of Absence   Give Facts Under Remarks     Other Leave of Absence   From To   Give Facts Under Remarks     Other Leave of Absence   From To   Give Facts Under Remarks     Transfer   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Suspension   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     New Position   Give Facts Under Remarks     New Position   Submit Form     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Rema		Retirement		Give Effective Date		
Layoff (lack of work or funds)   Give Facts Under Remarks     Other Changes   Military Leave of Absence   From To   Give Facts Under Remarks     Other Leave of Absence   From To   Give Facts Under Remarks     Transfer   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Suspension   Give Facts Under Remarks     Reinstatement   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     New Position   Submit Form     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Other   Give Facts Under Remarks		Deceased		Indicate Date		
Layoff (lack of work or funds)   Give Facts Under Remarks     Other Changes   Military Leave of Absence   Give Facts Under Remarks     Other Leave of Absence   From To   Give Facts Under Remarks     Transfer   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Suspension   Give Facts Under Remarks     Reinstatement   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     New Position   Submit Form     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Other   Give Facts Under Remarks     Give Fa		Removal		Attach Copy of Proceedings		
Other Changes    Military Leave of Absence		Layoff (lack of work or funds)				
Other Leave of Absence   From   To   Give Facts Under Remarks   Give Fact	Other Changes	Military Leave of Absence		Give Facts Under Remarks		
Transfer   Give Facts Under Remarks   Demotion   Give Facts Under Remarks   Give Facts Under Remark	O tares O minigro		From To	Give Facts Under Remarks		
Demotion Suspension Give Facts Under Remarks Change in Classification Change in Classification Change in Salary Change in Name				Give Facts Under Remarks		
Suspension   Give Facts Under Remarks   Indicate New Salary   Indicate New Salary   Give Facts Under Remarks   Give Facts Under Gave   Give Facts Under Gave   Give Facts Under Gave   Give Facts Under Gave   G				Give Facts Under Remarks		
Reinstatement Give Facts Under Remarks Change in Classification Give Facts Under Remarks New Position Submit Form Change in Salary Indicate New Salary Change in Name Give Facts Under Remarks Give Facts Under Remarks Give Facts Under Remarks  Remarks:  Remarks:  MECHANICVILLE CIVIL SERVICE COMMISSION  Title: Business Manager  Address: 25 Kniskern Ave. Mechanicville, NY 12118  Date:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law. Subject to any limitation or condition specified above.				Give Facts Under Remarks		
Change in Classification  New Position  Change in Salary  Change in Salary  Change in Name  Other  Submit Form  Indicate New Salary  Give Facts Under Remarks  Give Facts Under Remarks  Give Facts Under Remarks  MECHANICVILLE CIVIL  SERVICE COMMISSION  Title: Business Manager  Address:  25 Kniskern Ave. Mechanicville, NY 12118  Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.						
New Position						
Change in Salary Change in Name Cive Facts Under Remarks  MECHANICVILLE CIVIL SERVICE COMMISSION  Title: Business Manager  Address: 25 Kniskern Ave. Mechanicville, NY 12118  Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law. Subject to any limitation or condition specified above.						
Change in Name  Other  Change in Name  Other  Give Facts Under Remarks  Give Facts Under Remarks  MECHANICVILLE CIVIL  SERVICE COMMISSION  Title: Business Manager  Address:  25 Kniskern Ave. Mechanicville, NY 12118  Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.						
Remarks:  Appointing Officer: Jodi A. Birch  Title: Business Manager  Address:  25 Kniskern Ave. Mechanicville, NY 12118  Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.						
Remarks:  Appointing Officer: Jodi A. Birch  Title: Business Manager  Address:  25 Kniskern Ave. Mechanicville, NY 12118  Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.	Made - O - O - O - O - O - O - O - O - O -					
Appointing Officer: Jodi A. Birch  Title: Business Manager  Address: 25 Kniskern Ave. Mechanicville, NY 12118  Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.	Damaylas	Outer	<u> </u>	Give Facis Origin Atomana		
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Address: 25 Kniskern Ave. Mechanicville, NY 12118  Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.	****			WECHANICVILLE CIVIL		
Address: 25 Kniskern Ave. Mechanicville, NY 12118  Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.	Appointing Officer: J	odi A. Birch		SERVICE COMMISSION		
Address: 25 Kniskern Ave. Mechanicville, NY 12118  Date:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.				RECEIVED		
Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.			/ 12118 DA	ATE 6223 Pf. 1.		
This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.	Certificate valid until:					
Subject to any limitation or condition specified above.			accordance with Law and I			
	^					
	By:	Robert		Date: 5/23/23		

<del></del>						
From: City	County	Town 🗌	Village Or District ☑			
Department:						
	st Employee In Position:					
Name of Employee:	David Krom		Social Security Number			
Addre	. is set the					
Title of Position: Me	echanic		Salary:			
Non-Veteran 🗸	Veteran Disabled V	eteran Exen	npt Volunteer Firefighter			
Appointments	Check Nature Of	Effective Date	Action Necessary By			
••	Personnel Change	Bricerye Bate	Appointing Officer			
	Permanent		Return Report of Certification			
	Provisional		Attach Application			
	Temporary	From To	State Length of Employment			
	For Term of Office	From To	Give Facts Under Remarks			
	Permanent Promotion	1.0	Return Report of Certification			
	Provisional Promotion		Attach Nomination			
	☐ Non-Competitive Class		Attach Application			
	Exempt Class	<del>                                     </del>	Submit This Form Only			
	Labor Class		Attach Application			
Terminations	X Resignation	5/3/23	Submit Signed Resignation			
	Retirement	0,0,20	Give Effective Date			
	Deceased		Indicate Date			
	Removal	****	Attach Copy of Proceedings			
	Layoff (lack of work or funds)		Give Facts Under Remarks			
Other Changes	Military Leave of Absence		Give Facts Under Remarks			
	Other Leave of Absence	From To	Give Facts Under Remarks			
	Transfer		Give Facts Under Remarks			
	☐ Demotion		Give Facts Under Remarks			
	Suspension		Give Facts Under Remarks			
Ì	☐ Reinstatement		Give Facts Under Remarks			
	Change in Classification		Give Facts Under Remarks			
İ	New Position		Submit Form			
	Change in Salary		Indicate New Salary			
	Change in Name	***************************************	Give Facts Under Remarks			
	Other		Give Facts Under Remarks			
Remarks:						
Appointing Officer: ا		(	WECHANICVILLE CIVIL SERVICE COMMISSION			
<sup>ritle:</sup> Business Mana	ager	į	TECENTER			
<sup>Address:</sup> 25 Knisker		12118	TECEIVED			
Certificate valid until:						
This certif	ies that the above employment is in a Subject to any limita	ccordance with Law and Ri tion or condition specified a				
By: Jon C	Buch		Date; 5/2/23			



Birch, Jodi <jbirch@mechanicville.org>

Fwd: Me.

1 message

Pratt, Mike <mpratt@mechanicville.org>
To: Jodi Birch <jbirch@mechanicville.org>

Mon, Apr 24, 2023 at 4:08 PM

----- Forwarded message ----

From: Krom, David <dkrom@mechanicville.org>

Date: Mon, Apr 24, 2023 at 3:07 PM

Subject: Me.

To: Mike Pratt <mpratt@mechanicville.org>

Good afternoon Mike.

This email is to inform you that May 3rd will be my last day of employment at the Mechanicville public school. I appreciate everything you have done for me.

Let me know if you need anything else from me.

Michael Pratt Transportation Supervisor Mechanicville City Schools 25 Kniskern Ave Mechanicville NY 12118 518-664-9881 or ext 1104

	County 🗌	Town 🗌		Village Or District 🔽
Department:				
	ast Employee In Position :			
Name of Employee:	David Rose			Social Security Number:
Addre.		> . ▼		
Title of Position: Cl	eaner	*		Salary: 16,98
Non-Veteran 🛮	Veteran Disabled	Veteran 🗍	Exer	mpt Volunteer Firefighter
Appointments	Check Nature Of	Effe	ctive Date	
	Personnel Change		CUYE DAIL	Action Necessary By Appointing Officer
	Permanent			Return Report of Certification
•	Provisional	<del></del>		
	Temporary	From	То	Attach Application
	For Term of Office	From	To	State Length of Employment Give Facts Under Remarks
	Permanent Promotion	. A TOTAL	10	
	Provisional Promotion	<del> </del>		Return Report of Certification
	☐ Non-Competitive Class	<del>- </del>		Attach Nomination
	Exempt Class	<del> </del>		Attach Application
	X Labor Class	0/44/00		Submit This Form Only
erminations	Resignation	9/14/22		Attach Application
mmations	Retirement			Submit Signed Resignation
	Deceased	-		Give Effective Date
	Removal	<b>-</b>		Indicate Date
	Layoff (lack of work or funds)	<del> </del>		Attach Copy of Proceedings
ther Changes	Military Leave of Absence	<u> </u>		Give Facts Under Remarks
mer Changes	Other Leave of Absence	<u> </u>		Give Facts Under Remarks
	Transfer	From	То	Give Facts Under Remarks
				Give Facts Under Remarks
	Demotion			Give Facts Under Remarks
	Suspension	ļ	***	Give Facts Under Remarks
	Reinstatement			Give Facts Under Remarks
	Change in Classification			Give Facts Under Remarks
	New Position			Submit Form
	Change in Salary			Indicate New Salary
ļ	Change in Name			Give Facts Under Remarks
	U Other			Give Facts Under Remarks
marks: pointing Officer: Jo	adi A. Direk			MECHANICVILLE CIVIL
le: Business Mana				SERVICE COMMISSION
dress: 25 Knisker	n Ave. Mechanicville, NY	′ 12118		HECEIVED
rtificate valid until:			D,	ATE 5/10/23 R Lenden
This certifi	ies that the above employment is in a Subject to any limitat	ccordance wi	th Law and Ri	ules made in pursuance to Law.
TOPO C	Rise L	or conuit	on specified a	Date:
- Maria	AUU V			<u> </u>

From: Cit.			······································	
From: City  Department:	County	Town	Village Or District	
Department.				
1	ast Employee In Position :			
Name of Employee:	David Rose		Social Security Number	
Addres-				
Title of Position: Cle	Paner			
Non-Veteran 🗸			Salary:	
	Veteran Disabled V		npt Volunteer Firefighter	
Appointments	Check Nature Of	Effective Date	Action Necessary By	
	Personnel Change		Appointing Officer	
l	Permanent		Return Report of Certification	
	Provisional		Attach Application	
	Temporary	From To	State Length of Employment	
	For Term of Office	From To	Give Facts Under Remarks	
	X Permanent Promotion	3/14/23	Peturn Panart of Cartification	
	Provisional Promotion	3/14/23	Return-Report-of-Certification N/A-Attach Nomination	
	☐ Non-Competitive Class		**************************************	
	Exempt Class		Attach Application Submit This Form Only	
	X Labor Class			
Terminations	Resignation		Attach Application	
	Retirement		Submit Signed Resignation Give Effective Date	
j	Deceased	<u> </u>		
	Removal		Indicate Date	
	Layoff (lack of work or funds)		Attach Copy of Proceedings	
Other Changes	Military Leave of Absence		Give Facts Under Remarks	
omer ominges	Other Leave of Absence	From To	Give Facts Under Remarks	
ŀ	Transfer	FIOM 16	Give Facts Under Remarks	
<b> </b>	Demotion		Give Facts Under Remarks	
	Suspension		Give Facts Under Remarks	
-	Reinstatement		Give Facts Under Remarks	
	Change in Classification		Give Facts Under Remarks	
-	New Position		Give Facts Under Remarks	
- .	Change in Salary		Submit Form	
ļ-	Change in Name	•	Indicate New Salary	
-	Other		Give Facts Under Remarks	
Remarks:	Other		Give Facts Under Remarks	
			MECHANICVILLE CIVIL SERVICE COMMISSION	
Appointing Officer: Jo	odi A. Birch		DE AFILE	
<sup>ritle:</sup> Business Mana	***************************************		neceived	
		DA*	TE 5/10/23	
Address: 25 Kniskern Ave. Mechanicville, NY 12118  Certificate valid until:				
Date:				
This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.				
y Lele a	Birel		Date 5/10/23	

From:	n: City County Town Village Or District					District 🛮	
Department:							
		ployee In Position:					
Name of Employ	<sup>/ee:</sup> Jose	ph Stewart				Social Secu	rity Num'
Address		· · · · · · · · · · · · · · · · · · ·			****	I	
Title of Position:	Cleane	r		· · · · · · · · · · · · · · · · · · ·			Salary: 16.98
Non-Veteran 🗸		Veteran Disabled \	/eteran	]	Exer	npt Volunteer	Firefighter
Appointments		Check Nature Of	T I	Effectiv			Action Necessary By
		Personnel Change		711CCU1 V	c Date		Appointing Officer
		Permanent			*************	Return	Report of Certification
		Provisional					Application
		Temporary	From	T	0		ength of Employment
		For Term of Office	From	T	0		acts Under Remarks
		Permanent Promotion		~~~~		Return	Report of Certification
		Provisional Promotion				Attach	Nomination
		Non-Competitive Class				Attach.	Application
		Exempt Class				Submit	This Form Only
		Labor Class	9/14	/22		Attach.	Application
Terminations		Resignation				Submit	Signed Resignation
		Retirement				Give Ef	fective Date
		Deceased				Indicate	Date
		lemoval				Attach (	Copy of Proceedings
		ayoff (lack of work or funds)				Give Fa	cts Under Remarks
Other Changes		Iilitary Leave of Absence				Give Fa	cts Under Remarks
		other Leave of Absence	From	То		Give Fa	cts Under Remarks
		ransfer					cts Under Remarks
		emotion				Give Fa	cts Under Remarks
•		uspension				Give Fa	cts Under Remarks
		einstatement					cts Under Remarks
		hange in Classification				Give Fa	cts Under Remarks
		ew Position			***	Submit	
		hange in Salary			,	Indicate	New Salary
		hange in Name					cts Under Remarks
	1 🗆 0	ther			***************************************	Give Fa	cts Under Remarks
Remarks: MECHANICVILLE CIVIL							
Appointing Officer: Jodi A. Birch							
Title: Business Manager RECEVED							
Address: 25 Kniskern Ave. Mechanicville, NY 12118 DATE 5/16/23 R. Lulemour							
Certificate valid until: Date:							
This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law,  Subject to any limitation or condition specified above.							
By:	10 A	11206			progress a		Date:
( Hell Chile 5/10/23							

Department:   Name And Title of Last Employee In Position:	From:	City County C	Town 🔲	Village Or District 🔽						
Name of Employee: Joseph Stewart	Department:			· mage of District [V]						
Name of Employee: Joseph Stewart	Name And Title	of Last Employee In Position								
Title of Position: Cleaner										
Title of Position: Cleaner	Name of Employ	Name of Employee: Joseph Stewart Social Security Number:								
Title of Position: Cleaner   Disabled Veteran   Exempt Volunteer Firefighter   Action Necessary By Appointments   Check Nature Of Personnel Change   Effective Date   Action Necessary By Appointing Officer   Permanent   Return Report of Certification   Attach Application   Attach Application   Attach Application   Provisional   Attach Application   Attach Application   Provisional Provisional   Attach Application   Attach Application   Provisional Promotion   3/14/23   Return Report of Certification   Non-Competitive Class   Attach Application   Attach Application   Return Report of Certification   Non-Competitive Class   Attach Application   Attach Application   Resignation   Resignation   Resignation   Resignation   Submit This Form Only   Attach Application   Resignation   Resignation   Resignation   Resignation   Resignation   Resignation   Attach Application   Removal   Attach Application   Attach Application   Attach Application   Removal   Attach Application   Removal   Attach Application   Attach Application   Removal   Attach Application   Remarks   Removal   Attach Application   Remarks   Remarks   Removal   Attach Application   Remarks   Rem										
Non-Veteran	Title of Position:			Solomy						
Appointments    Check Nature Of Personnel Change	Non-Veteran 🗸	Veteran Disabled V	Veteran [] Eva	-						
Personnel Change	Appointments									
Permanent	• •		Effective Date							
Provisional										
Provisional   Attach Application   From To   State Length of Employment   From To   Give Facts Under Remarks   Permanent Promotion   3/14/23   Return Report-of Certification   //A-   Attach Nomination   Attach Application   Attach Application   Attach Application   Attach Application   Exempt Class   Attach Application   Attach Application   Submit This Form Only   Attach Application   Give Effective Date   Give Facts Under Remarks   Give F				Return Report of Certification						
For Term of Office   From   To   Give Facts Under Remarks   Permanent Promotion   3/14/23   Return Report of Gertification   Machine   Provisional Promotion   Attach Nomination   Attach Nomination   Non-Competitive Class   Attach Application   Exempt Class   Submit This Form Only   Attach Application   Exempt Class   Submit This Form Only   Attach Application   Submit Signed Resignation   Retirement   Give Effective Date   Give Effective Date   Indicate Date   Removal   Attach Copy of Proceedings   Attach Copy of Proceedings   Content of Give Facts Under Remarks   Give Facts Unde										
For Term of Office   From To   Give Facts Under Remarks   Permanent Promotion   3/14/23   Return Report of Certification   N/A-Attach Nomination   Attach Application   Attach Application   Submit This Form Only   Labor Class   Attach Application   Submit Signed Resignation   Give Effective Date   Indicate Date   Attach Application   Resignation   Give Effective Date   Indicate Date   Attach Copy of Proceedings   Indicate Date   Attach Copy of Proceedings   Give Facts Under Remarks   Give Facts Under			From To	State Length of Employment						
Provisional Promotion				Give Facts Under Remarks						
Non-Competitive Class			3/14/23	Return Report of Certification N/IL						
Bacempt Class   Submit This Form Only     Labor Class   Attach Application     Resignation   Submit Signed Resignation     Retirement   Deceased   Indicate Date     Removal   Attach Copy of Proceedings     Layoff (lack of work or funds)   Give Facts Under Remarks     Under Changes   Military Leave of Absence   Give Facts Under Remarks     Other Leave of Absence   From To   Give Facts Under Remarks     Transfer   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Suspension   Give Facts Under Remarks     Reinstatement   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other Change in Name   Give Facts Under Remarks     Change in Name   Give Facts Under Remarks     Change in Name   Give Facts Under Remarks     Other Change in Name   Give Facts Under				Attach Nomination						
Resignation   Resignation   Submit Signed Resignation   Retirement   Give Effective Date   Deceased   Indicate Date   Indicate Date   Indicate Date   Removal   Attach Copy of Proceedings   Give Facts Under Remarks   Give Facts Under Re		☐ Non-Competitive Class		Attach Application						
Attach Application   Submit Signed Resignation   Retirement   Give Effective Date   Indicate Date   Indicate Date   Attach Copy of Proceedings   Layoff (lack of work or funds)   Give Facts Under Remarks   Giv				Submit This Form Only						
Resignation   Submit Signed Resignation   Retirement   Give Effective Date   Deceased   Indicate Date   Indicate Date   Attach Copy of Proceedings   Give Facts Under Remarks   Give										
Retirement   Give Effective Date     Deceased   Indicate Date     Removal   Attach Copy of Proceedings     Layoff (lack of work or funds)   Give Facts Under Remarks     Other Changes   Military Leave of Absence   Give Facts Under Remarks     Other Leave of Absence   From To   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Reinstatement   Give Facts Under Remarks     Reinstatement   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     New Position   Submit Form     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Remarks:     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Change in Name   Give Facts Und	Terminations									
Deceased   Indicate Date     Removal   Attach Copy of Proceedings     Clayoff (lack of work or funds)   Give Facts Under Remarks     Other Changes   Military Leave of Absence   Give Facts Under Remarks     Other Leave of Absence   From To   Give Facts Under Remarks     Transfer   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Suspension   Give Facts Under Remarks     Reinstatement   Give Facts Under Remarks     Reinstatement   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     New Position   Submit Form     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other   Give Fact		Retirement		Give Effective Date						
Layoff (lack of work or funds)   Give Facts Under Remarks     Other Changes   Military Leave of Absence   Give Facts Under Remarks     Other Leave of Absence   From To   Give Facts Under Remarks     Transfer   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Suspension   Give Facts Under Remarks     Reinstatement   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     New Position   Give Facts Under Remarks     New Position   Give Facts Under Remarks     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Ot										
Layoff (lack of work or funds)   Give Facts Under Remarks     Other Changes   Military Leave of Absence   From To   Give Facts Under Remarks     Other Leave of Absence   From To   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Demotion   Give Facts Under Remarks     Suspension   Give Facts Under Remarks     Reinstatement   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     New Position   Submit Form     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other   Give				Attach Copy of Proceedings						
Other Changes    Military Leave of Absence		Layoff (lack of work or funds)								
Other Leave of Absence From To Give Facts Under Remarks Transfer Give Facts Under Remarks Demotion Give Facts Under Remarks Suspension Give Facts Under Remarks Reinstatement Give Facts Under Remarks Change in Classification Give Facts Under Remarks New Position Give Facts Under Remarks Change in Salary Indicate New Salary Change in Name Give Facts Under Remarks Give Facts Under Give Facts Under Remarks Give Facts Under Remarks Give Facts Unde	Other Changes									
Transfer Demotion Give Facts Under Remarks Suspension Give Facts Under Remarks New Position Give Facts Under Remarks New Position Give Facts Under Remarks New Position Give Facts Under Remarks Giv		Other Leave of Absence	From To							
Demotion   Give Facts Under Remarks     Suspension   Give Facts Under Remarks     Reinstatement   Give Facts Under Remarks     Change in Classification   Give Facts Under Remarks     New Position   Submit Form     Change in Salary   Indicate New Salary     Change in Name   Give Facts Under Remarks     Other   Give Facts Under Remarks     Ot		Transfer								
Suspension   Give Facts Under Remarks   Other Remarks   Give Facts Under Remarks   Submit Form   Indicate New Salary   Indicate New Salary   Give Facts Under Remarks   Give Facts Un		☐ Demotion								
Reinstatement Change in Classification Submit Form Change in Salary Indicate New Salary Change in Name Change i		Suspension								
Change in Classification   Give Facts Under Remarks   New Position   Submit Form   Indicate New Salary   Indicate New Salary   Give Facts Under Remarks   Give Facts Under Remarks   Give Facts Under Remarks		Reinstatement								
New Position   Submit Form   Indicate New Salary   Indicate New Salary   Give Facts Under Remarks   Give Facts Under Remarks		☐ Change in Classification								
Change in Salary Change in Name Change in Name Cother Coth										
Change in Name  Other  Other  Give Facts Under Remarks  Give Facts Under Remarks  Appointing Officer: Jodi A. Birch  Gitle: Business Manager  Address:  Z5 Kniskern Ave. Mechanicville, NY 12118  Gertificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.		☐ Change in Salary								
Compointing Officer: Jodi A. Birch  Citle: Business Manager  Commission  Commi										
Appointing Officer: Jodi A. Birch  Sitle: Business Manager  Address:  25 Kniskern Ave. Mechanicville, NY 12118  Sertificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.										
Citle: Business Manager  Address: 25 Kniskern Ave. Mechanicville, NY 12118  Service COMMISSION  Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.	Remarks:			Cive Lacis Chief Remarks						
Citle: Business Manager  Address: 25 Kniskern Ave. Mechanicville, NY 12118  Service COMMISSION  Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.										
Address: 25 Kniskern Ave. Mechanicville, NY 12118  Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.	ppointing Office	r: Jodi A. Birch		MECHANICALLE CHA						
Certificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.	<sup>itle:</sup> Business M	lanager		SERVICE COMMISSION						
ertificate valid until:  This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law	ddress: 25 Knis	kern Ave. Mechanicville NY	12118	RECEIVED						
This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law	Partificate valid until									
Subject to any limitation or condition energified above	This ce	ertifies that the above employment is in a	ccordance with Law and Ri	ules made in pursuance to Law						
		Subject to any limitat	ion or condition specified a	bove.						
y: JalaBirah Date: 5/10/23	y: HyD	aBurol								

From: City County Town Village Or District						
Department:						
Name And Title of Las	t Employee In Position :					
Name of Employee: N	leghan Warren			Social Secur	ity Number	
Address	Jug Drive Co					
Title of Position: Chi	ef Information Officer				Salary:	
Non-Veteran 🗸	Veteran Disabled V	eteran 🔲	Exen	npt Volunteer	Firefighter	
Appointments	Check Nature Of	Effec	tive Date		Action Necessary By	
*.*	Personnel Change				Appointing Officer	
	X Permanent	5/3/23			Report of Certification	
	Provisional	3/3/23			Application	
	Temporary	From	То		ength of Employment	
	For Term of Office	From	То		cts Under Remarks	
	Permanent Promotion	110111			Report of Certification	
	Provisional Promotion				Nomination	
	Non-Competitive Class	<u> </u>			Application	
	Exempt Class	<del> </del>			This Form Only	
	Labor Class				Application	
Terminations	Resignation				Signed Resignation	
7 01 1111111111111111111111111111111111	Retirement				fective Date	
1	Deceased			Indicate	Date	
	Removal			Attach (	Copy of Proceedings	
	Layoff (lack of work or funds)				cts Under Remarks	
Other Changes	Military Leave of Absence			Give Fa	cts Under Remarks	
• · · · · · · · · · · · · · · · · · · ·	Other Leave of Absence	From	To	Give Fa	cts Under Remarks	
	☐ Transfer .			Give Fa	cts Under Remarks	
	Demotion			Give Fa	cts Under Remarks	
	Suspension			Give Fa	cts Under Remarks	
	Reinstatement			Give Fa	cts Under Remarks	
ľ	Change in Classification			Give Fa	cts Under Remarks	
•	New Position			Submit	Form	
•	Change in Salary			Indicate	New Salary	
	Change in Name			Give Fa	cts Under Remarks	
	Other			Give Fa	cts Under Remarks	
Remarks: MECHANICVILLE CIVIL SERVICE COMMISSION						
Appointing Officer: Jodi A. Birch						
Title: Business Manager						
Address: DATE DATE						
Address: 25 Kniskern Ave. Mechanicville, NY 12118  Certificate valid until:  Date:						
This certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.						
Ints certifies that the above employment is in accordance with Law and Rules made in pursuance to Law.  Subject to any limitation or condition specified above.						
By: Date: 5/23/23						

Chief Information Officer #62154

TITLE OF ELIGIBLE LIST

MECHANICVILLE CIVIL SERVICE COMMISSION

#### RESIDENCE REQUIREMENT CHANGE - CLERK EXAMINATION ANNOUNCEMENT

#### **OLD RESIDENCY REQUIREMENT:**

For positions in the City, candidates must be a legal resident of the City of Mechanicville for ONE month prior to the date of the examination. For positions in the School District, candidates must be a legal resident of the School District for ONE month prior to the date of the examination.

#### **NEW RESIDENCY REQUIREMENT:**

Candidates must have been a legal resident of Saratoga, Rensselaer, Schenectady, Albany or Washington County for at least 12 months immediately preceding the date of examination. Preference in appointment may be given to successful candidates who have been legal residents of the City of Mechanicville for at least ONE month prior to the date of certification. For positions in the School District, candidates must be a legal resident of the School District for ONE month prior to the date of the examination.