PTF’S
**Personnel Transaction Form**

EMPL ID: 3407
Request Date: 4/29/2020
Effective Date: 5/22/2020
Hire Date: 5/22/2015

**Social Security #:**
- Emp Status: Nonexempt
- FLSA Status: Nonexempt

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>M.I.</th>
<th>Suffix</th>
<th>Birth Date</th>
<th>Sex</th>
<th>Marital Status</th>
<th>Race</th>
<th>CMHA Resident</th>
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</table>

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<th>Mailing Address 1</th>
<th>Address 2</th>
<th>City</th>
<th>State</th>
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<th>Action Description</th>
<th>Cost Number</th>
<th>Cost Number Description</th>
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<tbody>
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<td>PAY</td>
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<td>Step Increase</td>
<td>110460010000091000</td>
<td>FAR WEST POLICE SAL AMP 910</td>
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**FROM:**
- Job Code: 07101
- Job Code Description: Police Officer
- Rate of Pay: $25.0000 Hrly, $52,000.0000 Salary
- Department: Police Administration
- Dept ID #: 210000

**To:**
- Job Code: 07101
- Job Code Description: Police Officer
- Rate of Pay: $25.5000 Hrly, $53,040.0000 Salary
- Department: Police Administration
- Dept ID #: 210000

**Comments:**
Anniversary step increase effective 05/22/2020.

**Requested By:**
- Andrez Gonzalez
- 4/29/2020

**Date:**
- 4/29/2020

**Financial Approval (if applicable):**
- Tami Marinella
- 4/30/2020

**Date:**
- 4/30/2020

**Director of Human Resources:**
- Elizabeth McCaffrey
- 5/1/2020

**Date:**
- 5/1/2020

**Budgetary Approval:**
- Tami Marinella
- 4/30/2020

**Date:**
- 4/30/2020

**Chief Executive Officer:**
- Andrez Gonzalez
- 4/29/2020

**Date:**
- 4/29/2020
PE RSONNEL TRANSACTION FORM

EMPL ID 3407
Request Date 4/30/2019
Effective Date 5/22/2019
Hire Date 5/22/2015

SOCIAL SS#
Emp Status
FLSA Status Nonexempt

Last Name Lenz Jr.
First Name Robert
M.I. 
Suffix 
Birth Date 3/17/1988
Sex Male
Marital Status Married
Race White
CMHA Resident No

Mailing Address 1
Address 2
City 
State 
Zip Code 

Action PAY
Action Reason PRG
Action Description Step Increase
Cost Number 11044600100000091000
Cost Number Description FAR WEST POLICE SAL AMP 910

FROM:
Job Code 07101
Job Code Description Police Officer
Rate of Pay
Hrly $23.0000
Salary $47,840.0000
Department Police Administration
Dept ID # 210000

To:
Job Code 07101
Job Code Description Police Officer
Rate of Pay
Hrly $25.0000
Salary $52,000.0000
Department Police Administration
Dept ID # 210000

COMMENTS:
Anniversary step increase effective 05/22/2019.

Andres Gonzalez 4/30/2019
Requested By: Financial Approval (if applicable):
Date

Andres Gonzalez 4/30/2019
Department Director:

Elizabeth McCafferty 5/1/2019
Director of Human Resources:

Tami Marinella 5/1/2019
Budgetary Approval:

Chief Executive Officer:

# PERSONNEL TRANSACTION FORM

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<td>Step Increase</td>
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### FROM:
- **Job Code:** 07101
- **Job Code Description:** Police Officer
- **Rate of Pay:**
  - **Hrly:** $20.7100
  - **Salary:** $43,076.8000
- **Department:** Police Administration
- **Dept ID #:** 210000

### To:
- **Job Code:** 07101
- **Job Code Description:** Police Officer
- **Rate of Pay:**
  - **Hrly:** $23.0000
  - **Salary:** $47,840.0000
- **Department:** Police Administration
- **Dept ID #:** 210000

### COMMENTS:

---

Requested By: [Signature]

Date: 2/28/2019

Andres Gonzalez

Department Director:

Date

---

Elizabeth McCafferty

Director of Human Resources:

Date: 2/28/2019

---

Tami Marinella

Budgetary Approval:

Date: 2/28/2019

Chief Executive Officer:

Date
### PERSONNEL TRANSACTION FORM

**EMPL ID**: 3407  
**Request Date**: 2/25/2019  
**Effective Date**: 1/1/2018  
**SOCIAL SS#**: (Redacted)  
**Emp Status**: Active  
**FLSA Status**: Nonexempt

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<tr>
<td>07101</td>
<td>Police Officer</td>
<td>$18.6300</td>
<td>$38,750.4000</td>
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**To:**

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<td>$18.8200</td>
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**COMMENTS:**

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**Requested By:**  
**Date:** 2/28/2019  
**Andres Gonzalez**  
Department Director:  
Date

**Elizabeth McCafferty**  
**Date:** 2/28/2019  
**Director of Human Resources:**  
Date

**Tami Marinella**  
**Date:** 2/28/2019  
**Budgetary Approval:**  
Date

**Chief Executive Officer:**  
Date
**PERSONNEL TRANSACTION FORM**

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<tr>
<td>5/22/2017</td>
<td>07101 Police Officer</td>
<td>Hrly: $18,630, Salary: $38,750,4000</td>
<td>Police Administration</td>
<td>210000</td>
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**To:**

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<tbody>
<tr>
<td>5/22/2017</td>
<td>07101 Police Officer</td>
<td>Hrly: $20,500, Salary: $42,640,000</td>
<td>Police Administration</td>
<td>210000</td>
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**COMMENTS:**

Requested By: __________ Date: __________

Andres Gonzalez 10/16/2018
Department Director:

Elizabeth McCafferty 10/16/2018
Director of Human Resources:

Tami Marinella 10/16/2018
Budgetary Approval:

Chief Executive Officer: Date
PE. PERSONNEL TRANSACTION FORM

EMPL ID 3407
Request Date 5/2/2017
Effective Date 5/22/2017
Hire Date 5/22/2015
SOCIAL SS# [Redacted]
Emp Status
FLSA Status Nonexempt

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<tr>
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<td>07101 Police Officer</td>
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To:

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COMMENTS:
Pay Increase - Across the Board

Andres Gonzalez 5/2/2017
Requested By: Date

Financial Approval (if applicable): Date

Andres Gonzalez 5/2/2017
Department Director: Date

Elizabeth McCafferty 5/5/2017
Director of Human Resources: Date

Victoria Gruber 5/4/2017
Budgetary Approval: Date

Chief Executive Officer: Date
PEI PERSONNEL TRANSACTION FORM

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<th>EMPL ID</th>
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<tr>
<td>3407</td>
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<td>5/22/2016</td>
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<td>Salary</td>
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<tr>
<td>1/14/2017</td>
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<td>Police Officer</td>
<td>$20.5000</td>
<td>$42,640.0000</td>
<td>Police Administration</td>
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COMMENTS:
Contractual Increase eff. date 01/14/17.

Andres Gonzalez  7/23/2018
Requested By: Date

Financial Approval (if applicable): Date

Andres Gonzalez  7/23/2018
Department Director: Date

Elizabeth McCafferty  7/30/2018
Director of Human Resources: Date

Tami Marinella  7/30/2018
Budgetary Approval: Date

Chief Executive Officer: Date
<table>
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<td>Police Officer</td>
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<td>$42,640.0000</td>
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**COMMENTS:**

Andres Gonzalez 12/6/2018
Requested By: Date

Andres Gonzalez 12/6/2018
Department Director: Date

Tami Marinella 12/7/2018
Budgetary Approval: Date

Financial Approval (if applicable): Date

Elizabeth McCafferty 12/7/2018
Director of Human Resources: Date

Chief Executive Officer: Date
PERSONNEL TRANSACTION FORM

EMPL ID: 3407
Request Date: 7/8/2016
Effective Date: 5/22/2016
SOCIAL SS#: [Redacted]
Emp Status: Active
FLSA Status: Nonexempt
CMHA Resident: No

Last Name: Lenz Jr.
First Name: Robert
M.I.: A
Birth Date: 3/17/1988
Sex: Male
Marital Status: Single
Race: White

Mailing Address 1
Address 2
City
State
Zip Code

Action: PAY
Action Reason: ATB
Action Description: Across The Board
Cost Number: 105465001000000905000
Cost Number Description: HOUGH POLICE SAL AMP 905

FROM:
Job Code: 07101
Job Code Description: Police Officer
Rate of Pay: $13.7600
Department: Police Administration
Dept ID #: 210000

5/22/2015

To:
Job Code: 07101
Job Code Description: Police Officer
Rate of Pay: $14.8100
Department: Police Administration
Dept ID #: 210000
1/1/2016

Rate of Pay:

Hrly
Salary

$13.7600
$28,620.8000

$14.8100
$30,804.8000

COMMENTS:
Contractual increase effective January 1, 2016

Requested By: Andres Gonzalez
Date: 7/12/2016

Financial Approval (if applicable):

Director of Human Resources: Elizabeth McCafferty
Date: 7/12/2016

Chief Executive Officer:

Amy Waxman
Budgetary Approval: 7/12/2016

Date:
## PERSONNEL TRANSACTION FORM

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<th>Last Name</th>
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<td>Jr.</td>
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<tr>
<td>Police Officer</td>
<td>$13.76</td>
<td>$28,613.49</td>
<td>Police</td>
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### COMMENTS:

Cops Grant 648-446001-000000-210-000 75% & 105-446001-000000-905-000 @25%

Requested By: [Signature] 4/29/2015

Director of Human Resources: [Signature] 5/5/15

Budgetary Approval: [Signature] 5/4/15

Chief Executive Officer: [Signature] 5/1/15
**PERSONNEL TRANSACTION FORM**

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>M.I.</th>
<th>Suffix</th>
<th>Birth Date</th>
<th>Sex</th>
<th>Marital Status</th>
<th>Race</th>
<th>CMHA Resident</th>
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<tbody>
<tr>
<td>Lenz</td>
<td>Robert</td>
<td>A</td>
<td>Jr.</td>
<td>3/17/1988</td>
<td>M</td>
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<td>White</td>
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<th>Mailing Address 1</th>
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<th>State</th>
<th>Zip Code</th>
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<th>Action Description</th>
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<th>Cost Number Description</th>
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<tr>
<td>HIR</td>
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<td>New Position</td>
<td>See Below</td>
<td>Cops Grant 648</td>
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**FROM:**

<table>
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<tr>
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<th>Job Code Description</th>
<th>Rate of Pay</th>
<th>Department</th>
<th>Dept ID #</th>
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<tr>
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**TO:**

<table>
<thead>
<tr>
<th>Job Code</th>
<th>Job Code Description</th>
<th>Rate of Pay</th>
<th>Department</th>
<th>Dept ID #</th>
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<td>Police Officer</td>
<td>$13.76</td>
<td>$28,613.49</td>
<td>Police</td>
<td>210000</td>
</tr>
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</table>

**COMMENTS:**

Cops Grant
648-446001-000000-210-000 75% & 105-446001-000000-905-000 @25%

**Requested By:**

Director of Human Resources

Budgetary Approval

Chief Executive Officer
PERSONNEL
FILE
EMPLOYEE CHANGE OF NAME OR ADDRESS FORM

Name: 208 LEW

Social Security Number (Last 4 digits):

Department: Police

New Name: __________________________________________
(Please attach appropriate documentation)

New Address: _________________________________________
Street
City/State/Zip Code

Telephone Number: ___________________________________

Effective Date: 1/17/2019

Employee Signature

Date Completed 3/10/2022

The completed form with the appropriate documentation attached may be faxed or mailed to:

CMHA
Attention: Human Resources Department
8120 Kinsman Road
Cleveland, Ohio 44104
Fax: (216) 348-8236
EMPLOYEE
CHANGE OF NAME OR
ADDRESS FORM

Name: [Redacted]

Social Security Number (Last 4 digits): [Redacted]

Department: [Redacted]

New Name: (Please attach appropriate documentation)

New Address: [Redacted]

City/State/Zip Code

Telephone Number: [Redacted]

Effective Date: 1/17/2019

Employee Signature

Date Completed

The completed form with the appropriate documentation attached may be faxed or mailed to:

CMHA
Attention: Human Resources Department
8120 Kinsman Road
Cleveland, Ohio 44104
Fax: (216) 348-8236
EMPLOYEE
CHANGE OF NAME OR
ADDRESS FORM

Name: PO Robert A. Lew 452

Social Security Number (Last 4 digits): 

Department: Police

New Name: ____________________________
(Please attach appropriate documentation)

New Address: ____________________________
Street
City/State/Zip Code

Telephone Number: ____________________________

Effective Date: April/May 16

[Employee Signature]

01 Nov 16
Date Completed

The completed form with the appropriate documentation attached may be faxed or mailed to:

CMHA
Attention: Human Resources Department
8120 Kinsman Road
Cleveland, Ohio 44104
Fax: (216) 348-8236
EMPLOYEE
CHANGE OF NAME OR
ADDRESS FORM

Name: ROBERT A. LENZ

Social Security Number (Last 4 digits): 

Department: CMHA

New Name: 
(Please attach appropriate documentation)

New Address: 
Street 
City/State/Zip Code

Telephone Number: 

Effective Date: 11 Jun. 15

Employer Signature: 11 Jun. 15

Date Completed

The completed form with the appropriate documentation attached may be faxed or mailed to:

CMHA
Attention: Human Resources Department
8120 Kinsman Road
Cleveland, Ohio 44104
Fax: (216) 348-8236
Name: ROBERT A. Lenz

Social Security Number (Last 4 digits): [Redacted]

Department: CMHA

New Name: [Redacted] (Please attach appropriate documentation)

New Address: [Redacted]

City/State/Zip Code

Telephone Number: [Redacted]

Effective Date: 11/20/15

Employee Signature: [Signature]

Date Completed: 11/30/15

The completed form with the appropriate documentation attached may be faxed or mailed to:

CMHA
Attention: Human Resources Department
8120 Klusman Road
Cleveland, Ohio 44104
Fax: (216) 348-8236
By Authority of the Board of Education of the
Cleveland Municipal School District, Cleveland, Ohio

Lincoln-West High School

has awarded this
Diploma

to

Robert Alexander Lenz Jr.

who has satisfactorily completed the requirements prescribed for graduation
from the High Schools of the Cleveland Municipal School District

June 6, 2007

G. A. Anderson
Chief Executive Officer

Eva M. Wright
Principal

Lawrence W. Davis
Chair, Board of Education

James D. Forlidge
Chief Financial Officer
Name: ROBERT A. LENZ JR.

SS#: [Redacted]

1. Please review the attached job functions for the position of Police Officer. Are you able to perform these tasks with or without an accommodation?
   YES

2. Have you ever attended a Basic Peace Officer Training Academy approved by the Ohio Peace Officer Training Commission? YES
   If YES, where and when:
   Hocking College, Nelsonville, OH 45764
   (Academy Name, City, State)
   APRIL 2014 - MAY 2014
   (Date(s) of Attendance: Month and Year)

3. Please review the attached work shifts. Are you able to work all of these as assigned? YES

4. Are you a United States citizen? YES
   If NO, do you intend to become one?

5. Have you ever used illegal drugs? YES

6. When is the last time you used illegal drugs? 5 YEARS AGO

7. Do you drink alcohol? YES

8. Have you ever been arrested and convicted for driving under the influence? NO

9. Name and telephone number of most recent employer:
   AUTOZONE
   (Position / Title)
   PARTS SALES
   (740) 594-2690

   Number of days absent: 3
   How many Mondays and/or Fridays were you absent and/or tardy other than approved vacation leave? 0

Signature ROBERT A. LENZ JR.
Date 10 JUL 2014
To Whom It May Concern:

Robert A. Lenz, Jr. has recently applied for the position of Reserve with the Cuyahoga Metropolitan Housing Authority Police Department. He/she has provided signed authorization for release of employment history and listed you and/or your company as a former employer.

We have provided a brief questionnaire and would appreciate your cooperation in promptly completing and returning it in the envelope provided. Your reply will assist us in determining the applicant’s overall suitability for employment.

Your response will remain confidential and will not be shared with the applicant.

Sincerely,

Thomas Burdyshaw, Commander

AUTHORIZATION FOR RELEASE OF CONFIDENTIAL INFORMATION
I hereby authorize the recipient of this letter to release and provide any and all information regarding my employment history to the Cuyahoga Metropolitan Housing Authority Police Department. I understand this information may be used to determine my suitability for employment and will not hold the recipient and/or employer responsible for its release thereof.

DATE: 10/1/2014

SIGNATURE: Robert A. Lenz
APPLICANT NAME: ________________________________

PLEASE COMPLETE THE FOLLOWING:

DATE EMPLOYED: _________________ DATE SEPARATED: _________________

JOB TITLE: ________________________ REASON FOR LEAVING: _________________

WOULD YOU REHIRE? YES______ NO______

IF NO, STATE REASON: ______________________________________

APPRAISAL

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>EXCELLENT</th>
<th>GOOD</th>
<th>FAIR</th>
<th>POOR</th>
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<td>Quality of Work</td>
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<tr>
<td>Quantity of Work</td>
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<tr>
<td>Learning Ability</td>
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<tr>
<td>Cooperation with Supervisors</td>
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<tr>
<td>Cooperation with Fellow Employees</td>
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<tr>
<td>Initiative</td>
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<tr>
<td>Attendance</td>
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<tr>
<td>Punctuality</td>
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<tr>
<td>Ability to work Without close supervision</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

ADDITIONAL COMMENTS: _____________________________________________

DATE: ___________________________ SIGNATURE: ________________________

TITLE: ____________________________

COMPANY NAME: ________________________________
First Name: robert Middle: a Last Name: lenz
Address Line 1: 
Address Line 2: 
Zip: [Redacted] City: [Redacted] State: OH
Home Phone: [Redacted] Business Phone: (__) - ____ ext. ____
Prior address: (if less than five years)
Please indicate any other formal name by which you've been known (e.g. maiden name):
How did you learn of us? Ad in paper
College/School Walk-in or unsolicited résumé
Employment Agency Other:

Employment Preference
Do you prefer: ✓ Full-time? If full-time: ✓ Daytime? ✓ Evening? ✓ Weekends?
✓ Check here if you would consider temporary employment
✓ Check here if interested in seasonal work.
Please indicate dates available for seasonal work:

Pay expected: $13.00 Hourly

Have you ever been involuntarily terminated by an employer?
Non-U.S. Citizens Only: Are you legally eligible to work in the United States?
Are you a CMHA resident?
Have you ever been employed with CMHA?
Are you an HCVP participant?
*Do you have any interest, direct or indirect, in any residential property with a CMHA Housing Assistance Payment contract?
*Does any member of your immediate family or household have any interest, direct or indirect, in any residential property with a CMHA Housing Assistance Payment Contract? (*Immediate family" means your spouse, parent (including a stepparent), child, grandparent, grandchild, brother or sister, whether related by full blood or as a "half" or "step" relative; "household member" means any person related by blood or marriage and residing in your household).
*Do you have any interest, direct or indirect, in any contract, subcontract, or arrangement with CMHA?
*Does any member of your immediate family or household have any interest, direct or indirect, in any contract, subcontract, or arrangement with CMHA? (*Immediate family" means your spouse, parent (including a stepparent), child, grandparent, grandchild, brother or sister, whether related by full blood or as a "half" or "step" relative; "household member" means any person related by blood or marriage and residing in your household).

All applicants are required to answer the following questions*:
1. Have you ever been convicted of a felony?
2. Have you ever pled guilty or no contest to a felony?
3. Do you currently have pending any felony or misdemeanor charges against you?

*CMHA conducts full criminal background checks on applicants. A prior record of offense(s) may or may not disqualify an applicant from consideration for employment. The date, nature and seriousness of the offense and any rehabilitation will be considered in light of the duties of the position for which the person has applied.

Do you have a valid driving license?
*If yes, State: OH Driver's License Number:
Any moving violations in the past 3 years?
<table>
<thead>
<tr>
<th>School Name</th>
<th>City</th>
<th>State</th>
<th>Major/Minor</th>
<th>Status</th>
<th>Date Completed</th>
<th>Degree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hocking College</td>
<td>Nelsonville</td>
<td>OH</td>
<td>Police Science</td>
<td>Some College</td>
<td>8/2014</td>
<td>Associates</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Currently Pursuing</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Completed Degree</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
To assist us in verifying references, please complete all information accurately and be sure to indicate the employer’s current address and phone number.

Check this box if you do not have any previous employers:

*Employer: Autozone  
*Street Address: 912 E. State St. Athens  
*Date Started: 6/2012  
*Title/Position: Costumer service  
*Name of Last Supervisor: Matt Barnhouse  
*Reason for Leaving: Currently still employed  
*May we contact for a reference at this time? Yes No  
*State: OH  
*Date Ended: Present/Present  
*Salary: $8.50 Hourly

*Employer: Solution Industries  
*Street Address: 17830 Englewood Dr. Middleburg Heights  
*Date Started: 10/2008  
*Title/Position: Warehouse shipper / receiver  
*Name of Last Supervisor: Steve Parham  
*Reason for Leaving: Moved to Athens, Ohio for college  
*May we contact for a reference at this time? Yes No  
*State: OH  
*Date Ended: 6/2012  
*Salary: $13.00 Hourly

*Brief description of your responsibilities: Part Sales, costumer service, and limited auto part installation
Name: Kyle White  
Position: Detective Sgt. CMHA  
Phone: (216) 255-1875

Name: George Senger  
Position: SSG. U.S. Army National Guard  
Phone: (440) 463-0346

Name: Kevin Zimmerman  
Position: Sgt. U.S. Army National Guard  
Phone: (440) 251-8541

Name: Jonathan Pacholke  
Position: Spc. U.S. Army National Guard / R.T.A. Police Officer  
Phone: (216) 956-5477

If you have ever been employed with the State of Ohio or any of its political subdivisions (i.e. CMHA, RTA, City of Cleveland, Board of Education, etc.), please list them below:

<table>
<thead>
<tr>
<th>Agency</th>
<th>From</th>
<th>To</th>
</tr>
</thead>
</table>

Do you or any member of your family work for the Cuyahoga Metropolitan Housing Authority (CMHA)?

Yes  No

Name: John Smiddy  
Where: Police Department

---

Maintenance:
- Carpentry  
- Landscaping  
- Painting  
- Electrical  
- Heating  
- Plastering  
- Tiling  
- Inspections  
- Plumbing

Other: APCO Certificate, Military trained as an Infantrymen, Combat Life Saver Certificate, Operate well under high stress.

Clerical:
- Typing WPM: 75

Computer Programs:
- Microsoft:  
  - Word  
  - Excel  
  - Access  
  - WordPerfect  
  - PowerPoint

Other:

License & Certifications

Motor Vehicle: CDL  
Yes  No

Other:

Public Employees Retirement System of Ohio (PERS)

Are you currently receiving Retirement Benefits from PERS?

Yes  No
The information provided by me on this application is true and complete. I have not knowingly falsified or withheld any facts. I understand that any such falsification or withholding, no matter when discovered, will disqualify me from further consideration as a candidate for employment with CMHA or be grounds for termination if I am employed.

If I become employed by CMHA, I understand that I will be bound by CMHA's Code of Conduct and all of its policies and procedures.

I understand that any offer is subject to CMHA obtaining favorable references from prior employers and my ability to establish employment eligibility under the Immigration Reform and Control Act of 1986.

I understand that any job offer will be contingent upon the results of a pre-employment physical which includes testing for the presence of alcohol or drugs in my system.

I have read, understand and agree to the above conditions of employment. I acknowledge that no promises regarding employment have been made to me and I understand that no such promise would be binding upon CMHA unless made in writing by a duly-authorized officer of CMHA. If I become employed by CMHA, other than a position that is under a union contract, I understand that I will be an employee at-will, which means that I have the right to terminate my employment at any time, and that CMHA has the same right to terminate my employment, with or without cause, and with or without notice, at any time.

Summary of your rights under the Fair Credit Reporting Act

By entering your name in the box below, you are electronically signing this application. Upon acceptance, you may be required to physically sign a hard copy of the above stated terms.

Your Full Name: Robert Alexander Lenz Jr.

Resume Information:

- Resume Name: Resume.docx
  - View: [ ]
ROBERT A. LENTZ JR.

PROFESSIONAL EXPERIENCE

UNITED STATES ARMY
Ft. Benning, GA, United States
Infantry October 2011 - Present
- Graduated from Ft. Benning, GA, Feb. 10, 2012 as a United States
  Infantryman. Currently in the National Guard, stationed in Cleveland, OH
- Training focused on leadership abilities, control in high stress situations, time
  management, quality workmanship, and handling high powered weaponry.
- Bco. 1 – 145th INF Mechanized infantry unit.

AUTOZONE
912 E. State St. Athens, Oh 45701
(740)594-2690
Parts Sales Rep. June 2012 – Present
- Auto part sales
- Customer service
- Limited auto parts installer

SOLUTION INDUSTRIES
17830 Englewood Dr. Middleburg Heights, OH 44130, United States
(440)816-9500
Warehouse Shipper/ Receiver, October 2008 – June 2012
- Solution Industries is a fastener distributing company in the Cleveland Area.
  They handle the needs of other companies in the "nut and bolt" department
- Trained on forklift, loading small trucks to 53" semi-truck rigs. Company
  driver, making pick-ups and deliveries, underwear in all weather.

WACKENHUT CORPORATIONS
5510 Pearl Road, Suite 100 Parma, OH 44129, United States
(440) 845-0260
Security Guard, October 2007 – March 2008
- Wackenhut Corp. was a private security company. Through this company I was
  placed as a security guard at Marc's, a local grocery store.
- HazMat and CPR certified.
EDUCATION

Hocking College
Nelsonville, Oh 45764, United States

- In Process of receiving Associates Degree in Police Science
  (estimated end date: Dec. 2014)
- OPTA Certification

UNITED STATES ARMY BASIC TRAINING
Ft. Benning, GA, United States
Graduated: Feb. 10, 2012

LINCOLN-WEST HIGH SCHOOL
Cleveland, OH, United States
Graduated: June 2007

ADDITIONAL SKILLS

- OPOTA Certificate
- APCO Certificate
- Police Carbine Certificate
- Operate well under high levels of stress, fast pace decision making.
- Problem-solving and decision making skills with the ability to develop and implement effective action plans.
- Excellent communication and presentation skills.
- Studied KALI Filipino martial arts for 3+ years
- Combat Life Saver certificate

REFERENCES

Kyle White
Detective for Cuyahoga Metro Housing Authority Police Department.

[Blurred cell phone number]
Kevin Zimmerman
Sgt. Army National Guard
(440)251-8541
8e South St.
Painesville, Oh 44077

Jonathan Pacholke
Spc. Army National Guard
Police Officer for RTA Cleveland, Oh
(216)956-5477
4072 Erie St.
Willoughby, Oh 44094

George Senger
Ssg. Army National Guard
(440)463-0346
69 S 19th ST. Apt. A
Pittsburgh, Pa 15203
This is a copy of the POLICE ARREST RECORD of the above named subject, on file in the RECORD FILE SECTION of the CLEVELAND DIVISION OF POLICE. It is only the record of offenses in the CITY OF CLEVELAND proper and does not cover the other 61 municipalities and towns in Cuyahoga County, in which CLEVELAND is located. This record DOES NOT include the judicial disposition(s).
Pre-Employment Inquiry Release

In connection with, and for the duration of my employment with you, I understand that investigative background inquiries are to be made on myself including consumer, criminal, driving, employment, education and other reports. These reports will include information as to my character, work habits, performance and experience along with reasons for termination of past employment from previous employers. Further, I understand that you will be requesting information from various federal, state and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil and other experiences as well as claims involving me in the files of insurance companies.

I authorize, without reservation, any present or former employer, police department, educational or financial institution, or any other party or agency contracted by this employer to furnish the Cuyahoga Metropolitan Housing Authority (CMHA), or its representatives any and all information in their possession regarding the undersigned in connection with my application for employment by CMHA. A photocopy of this authorization may be accepted with the same authority as the original. Educational institutions are authorized to release my grade point average, transcripts, grades, disciplinary records and any other relevant information.

My signature below provides for this full release of information and acknowledges I received a summary of my rights under the Fair Credit Reporting Act.

Print Full Name:  ROBERT ALEXANDER LENZ Jr.

If name changed (through marriage or otherwise) or any other alias, print former names here:

Social Security Number: [redacted]
Date of Birth*  MAR 17 1982
Month Day Year

Current Street Address: [redacted]

City/State/Zip: [redacted]

Home Phone Number: [redacted]

Driver's License Number: [redacted]
State OHIO

Applicant's Signature  [redacted]  Date 10 Jul, 2014

*Date of Birth is being requested in order to obtain accurate retrieval of records.
First Name: Robert
Middle: M
Last Name: Lenz
Address Line 1: [redacted]
Address Line 2: [redacted]
Zip: 44223
Home Phone: [redacted]
Business Phone: (____) ___-____ ext. ______
Prior Address: [redacted]

How did you learn of us?
☐ Ad in paper
☐ Employee (Name): Sgt. Smiddy, John
☐ College/School
☐ Walk-in or unsolicited résumé
☐ Employment Agency
☐ Other:

Employment Preferences:

Do you prefer:
☐ Full-time?
☐ Part-time?
If full-time:
☐ Daytime?
☐ Evening?
☐ Weekends?

If part-time:
☐ Daytime?
☐ Evening?
☐ Weekends?

☐ Check here if you would consider temporary employment
☐ Check here if interested in seasonal work.

Please indicate dates available for seasonal work:

Pay expected: $13.00 Hourly
Have you ever been involuntarily terminated by an employer?  
Non-U.S. Citizens Only: Are you legally eligible to work in the United States?  
Are you a CMHA resident?  
Have you ever been employed with CMHA?  
Are you an HCVP participant?  
*Do you have any interest, direct or indirect, in any residential property with a CMHA Housing Assistance Payment contract?  
*Does any member of your immediate family or household have any interest, direct or indirect, in any residential property with a CMHA Housing Assistance Payment Contract? ("immediate family" means your spouse, parent (including a stepparent), child, grandparent, grandchild, brother or sister, whether related by full blood or as a "half" or "step" relative; "household member" means any person related by blood or marriage and residing in your household).  
*Do you have any interest, direct or indirect, in any contract, subcontract, or arrangement with CMHA?  
*Does any member of your immediate family or household have any interest, direct or indirect, in any contract, subcontract, or arrangement with CMHA? ("immediate family" means your spouse, parent (including a stepparent), child, grandparent, grandchild, brother or sister, whether related by full blood or as a "half" or "step" relative; "household member" means any person related by blood or marriage and residing in your household).  
All applicants are required to answer the following questions*:  
1. Have you ever been convicted of a felony?  
2. Have you ever pled guilty or no contest to a felony?  
3. Do you currently have pending any felony or misdemeanor charges against you?  
*CMHA conducts full criminal background checks on applicants. A prior record of offense(s) may or may not disqualify an applicant from consideration for employment. The date, nature and seriousness of the offense and any rehabilitation will be considered in light of the duties of the position for which the person has applied.

Do you have a valid driving license?  
If yes, State: OH Driver's License Number:  
Any moving violations in the past 3 years?
### High School Information

<table>
<thead>
<tr>
<th>School Name</th>
<th>City</th>
<th>State</th>
<th>Status</th>
<th>Date Completed</th>
<th>Degree</th>
</tr>
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<tbody>
<tr>
<td>Lincoln-west</td>
<td>Cleveland</td>
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### Vocational/Technical School Information

<table>
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<th>School Name</th>
<th>City</th>
<th>State</th>
<th>Major/Minor</th>
<th>Status</th>
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</table>

### College Information

<table>
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<tr>
<th>School Name</th>
<th>City</th>
<th>State</th>
<th>Major/Minor</th>
<th>Status</th>
<th>Date Completed</th>
<th>Degree</th>
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<tr>
<td>Hocking College</td>
<td>Nelsonville</td>
<td>OH</td>
<td>Police Science</td>
<td>Some College</td>
<td>Month/Year</td>
<td>Associates</td>
</tr>
</tbody>
</table>

To assist us in verifying references, please complete all information accurately and be sure to indicate the employer's current address and phone number.

Check this box if you do not have any previous employers: ☐

<table>
<thead>
<tr>
<th>Employer</th>
<th>Phone</th>
<th>State</th>
<th>Date Started</th>
<th>Date Ended</th>
<th>Salary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autozone</td>
<td>(740) 594-2690</td>
<td>OH</td>
<td>6/2012</td>
<td>Present/Present</td>
<td>$8.50 Hourly</td>
</tr>
<tr>
<td>Matt Barnhouse</td>
<td></td>
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</table>

*Reason for Leaving: Currently still employed

*May we contact a reference at this time? ☑ Yes ☐ No

State the name under which you were employed if different than now:

*Brief description of your responsibilities: Part Sales, costumer service, and limited auto part installation

<table>
<thead>
<tr>
<th>Employer</th>
<th>Phone</th>
<th>State</th>
<th>Date Started</th>
<th>Date Ended</th>
<th>Salary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Solution Industries</td>
<td>(440) 816-9500</td>
<td>OH</td>
<td>10/2008</td>
<td>6/2012</td>
<td>$13.00 Hourly</td>
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<tr>
<td>Steve Parham</td>
<td></td>
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</tbody>
</table>

*Reason for Leaving: Moved to Athens, Ohio for college

*May we contact a reference at this time? ☑ Yes ☐ No

State the name under which you were employed if different than now:

*Brief description of your responsibilities: Shipping and receiving fastener products
Name: Kyle White  
Position: Detective Sgl. CMHA

Name: George Senger  
Position: SSG. U.S. Army National Guard

Name: Kevin Zimmerman  
Position: Sgt. U.S. Army National Guard

Name: Jonathan Pacholke  
Position: Spc. U.S. Army National Guard / R.T.A. Police Officer

If you have ever been employed with the State of Ohio or any of its political subdivisions (i.e. CMHA, RTA, City of Cleveland, Board of Education, etc.), please list them below:

Agency  From  To

Do you or any member of your family work for the Cuyahoga Metropolitan Housing Authority (CMHA)?  ☒ Yes  ☐ No
Name: John Smiddy  
Where: Police Department

Maintenance:  ☐ Carpentry  ☐ Painting  ☐ Heating  ☐ Tiling  ☐ Plumbing
☐ Landscaping  ☐ Electrical  ☐ Plastering  ☐ Inspections
Other: APCO Certificate, Military trained as an Infantrymen, Studied KALI Filipino for 3+ years, Combat Life Saver Certificate, Operate well under high stress.

Clerical:  ☐ Typing WPM: 75

Computer Programs:  ☐ Microsoft:
☐ Word  ☐ Excel  ☐ Access
☐ WordPerfect  ☐ Powerpoint

Motor Vehicle: CDL  ☐ Yes  ☐ No

License & Certifications

Are you currently receiving Retirement Benefits from PERS?  ☐ Yes  ☐ No
The information provided by me on this application is true and complete. I have not knowingly falsified or withheld any facts. I understand that any such falsification or withholding, no matter when discovered, will disqualify me from further consideration as a candidate for employment with CMHA or be grounds for termination if I am employed.

If I become employed by CMHA, I understand that I will be bound by CMHA’s Code of Conduct and all of its policies and procedures.

I understand that any offer is subject to CMHA obtaining favorable references from prior employers and my ability to establish employment eligibility under the Immigration Reform and Control Act of 1986.

I understand that any job offer will be contingent upon the results of a pre-employment physical which includes testing for the presence of alcohol or drugs in my system.

I have read, understand and agree to the above conditions of employment. I acknowledge that no promises regarding employment have been made to me and I understand that no such promise would be binding upon CMHA unless made in writing by a duly-authorized officer of CMHA. If I become employed by CMHA, other than a position that is under a union contract, I understand that I will be an employee at-will, which means that I have the right to terminate my employment at any time, and that CMHA has the same right to terminate my employment, with or without cause, and with or without notice, at any time.

Summary of your rights under the Fair Credit Reporting Act.

By entering your name in the box below, you are electronically signing this application. Upon acceptance, you may be required to physically sign a hard copy of the above stated terms.

Your Full Name: Robert Alexander Lenz Jr.

Resume Information

Resume Name
Resume.docx

Uploaded On
6/25/2014

View
ROBERT A. LENZ JR.

PROFESSIONAL EXPERIENCE

UNITED STATES ARMY
Ft. Benning, GA, United States
Infantry October 2011 - Present
• Graduated from Ft. Benning, GA, Feb. 10, 2012 as a United States Infantryman. Currently in the National Guard, stationed in Cleveland, OH
• Training Focused on leadership abilities, control in high stress situations, time management, quality workmanship, and handling high powered weaponry.
• Bco. 1 – 145th INF Mechanized infantry unit.

AUTOZONE
912 E. State St. Athens, Oh 45701
(740)594-2690
Parts Sales Rep. June 2012 – Present
• Auto part sales
• Costumer service
• Limited auto parts installer

SOLUTION INDUSTRIES
17830 Englewood Dr. Middleburg Heights, OH 44130, United States
(440)816-9500
Warehouse Shipper/ Receiver, October 2008 – June 2012
• Solution Industries is a fastener distributing company in the Cleveland Area. They handle the needs of other companies in the "nut and bolt" department
• Trained on forklift, loading small trucks to 53" semi-truck rigs. Company driver, making pick-ups and deliveries, underweight in all weather.

WACKENHUT CORPORATIONS
5510 Pearl Road, Suite 100 Parma, OH 44129, United States
(440) 845-0260
Security Guard, October 2007 – March 2008
• Wackenhut Corp. was a private security company. Through this company I was placed as a security guard at Marc's, a local grocery store.
• HazMat and CPR certified.
EDUCATION

Hocking College
Nelsonville, Oh 45764, United States

- In Process of receiving Associates Degree in Police Science (estimated end date: Dec. 2014)
- OPTA Certification

UNITED STATES ARMY BASIC TRAINING
Ft. Benning, GA, United States
Graduated: Feb. 10, 2012

LINCOLN-WEST HIGH SCHOOL
Cleveland, OH, United States
Graduated: June 2007

ADDITIONAL SKILLS

- OPOTA Certificate
- APCO Certificate
- Police Carbine Certificate
- Operate well under high levels of stress, fast pace decision making.
- Problem-solving and decision making skills with the ability to develop and implement effective action plans.
- Excellent communication and presentation skills.
- Studied KALI Filipino martial arts for 3+ years
- Combat Life Saver certificate

REFERENCES

Kyle White
Detective for Cuyahoga Metro Housing Authority Police Department.

[Redacted] cell
Kevin Zimmerman
Sgt. Army National Guard
(440)251-8541
8e South St.
Painesville, Oh 44077

Jonathan Pacholke
Spc. Army National Guard
Police Officer for RTA Cleveland, Oh
(216)956-5477
4072 Eric St.
Willoughby, Oh 44094

George Senger
Ssg. Army National Guard
(440)463-0346
69 S 19th ST. Apt. A
Pittsburgh, Pa 15203
Pre-Employment Interview for Police Officers

Applicant's Name: ROBERT A LENZ JR

Date: 10 JUN 2010

1. Tell us about yourself, who you are, schools, growing up, any military service, hobbies, etc?

2. Why are you interested in a career in law enforcement?

3. Do you have pending any felony or misdemeanor charges against you? Do you currently have pending any investigations or disciplinary action against you? If YES, explain (who, what, when, where):

4. Careers in law enforcement are considered very stressful line of work, how do you handle stress?
5. Do you feel persons in law enforcement should be held to a higher standard for conduct versus persons outside of law enforcement? Explain your answer and why you feel the way you do.

We believe officers are in the public's best interest. 

6. Overall, what are your thoughts about CMHA and people who live in public housing?

The program is a very good thing to meet the people's needs.

7. Is there anything else that you would like CMHAPD to know about you?

I am very easy going, easy to please and learning.

7. Other Comments:


Cuyahoga Metropolitan Housing Authority Police Department

POLICE OFFICER

APPLICANT STATUS SHEET

NAME: Robert A. Leuz Jr.

<table>
<thead>
<tr>
<th>ITEM</th>
<th>DATE COMPLETED</th>
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<tbody>
<tr>
<td>APPLICATION PACKET</td>
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<tr>
<td>WRITTEN EXAMINATION/SCORE</td>
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<tr>
<td>PHYSICAL AGILITY EXAM</td>
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<td>BACKGROUND INVESTIGATION</td>
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<td>VOICE STRESS ANALYSIS</td>
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<td>INTERVIEW</td>
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<td>PSYCHOLOGICAL EXAMINATION</td>
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<td>PHYSICAL EXAMINATION</td>
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<tr>
<td>RECOMMENDATION</td>
<td></td>
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<tr>
<td>FORWARDED FOR HIRE</td>
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</tr>
<tr>
<td>REJECTION LETTER SENT</td>
<td></td>
</tr>
</tbody>
</table>

PROCESSOR SIGNATURE
Cuyahoga Metropolitan Housing Authority Police Department

STOP

Do not fill out this application packet until you have completely read these instructions.

READ AND SIGN BELOW

This application packet is to be completed at this time.

This application and all parts thereof must be printed or typed, except the signatures.

All sections must be completed.

All documents that are to be notarized must be notarized.

All addresses for all PAST EMPLOYERS and PERSONAL REFERENCES MUST include CITY AND ZIP CODE.

Prior to your application being processed, you must submit photocopies of:

a. High School Diploma or Equivalent
b. Valid Ohio Drivers License

Finally, I attest that all the facts set forth in this application for employment are true and complete.

Further, I understand that any missing items, false statement or deliberate misleading information may cause this application to be rejected or not processed at all. I also understand that if employed, false statements on this application shall be considered sufficient cause for dismissal.

[Signature]
Signature of Applicant

[Date]
CUYAHOGA METROPOLITAN HOUSING AUTHORITY
POLICE DEPARTMENT

HAVE YOU EVER SERVED IN THE MILITARY?  YES: X  NO

DATE: 10 JUN 2014 FROM: 3 AUG 2011 TO PRESENT: 13 AUG

HONORABLE DISCHARGE:

STILL ACTIVE: NATIONAL GUARD

OTHER:

HAVE YOU EVER BEEN ARRESTED?  YES: NO X

CIRCUMSTANCES:

HAVE YOU EVER BEEN CONVICTED?  YES: NO X

CIRCUMSTANCES:

IF SO WAS YOUR RECORD SEALED OR EXPUNGED? YES: NO

Signature: Robert L. Levy
Date: 10/14/2014

REVISED 12/99
Cuyahoga Metropolitan Housing Authority Police Department
SURVEY

Please take a moment to complete the questionnaire below.
Your cooperation is appreciated.

1. How did you hear about the CMHA Police Department?
   Newspaper ____________________________
   Friend/Relative ☑

2. Where do you look to obtain information about career opportunities as a Police Officer?
   INTERNET mostly ____________________________

3. What interested you MOST about the job? (Choose 1 only).
   Salary __________
   Benefits __________
   Full-time ☑
   Other ____________________________

4. Do you know someone, other than yourself, looking for employment opportunities as a Police Officer?
   Yes ☑
   No __________

5. If yes, please list their name(s) and phone number so we may contact them to send information about career opportunities with CMHAPD.
   1. ____________________________ (Name) ____________________________ (Phone)
   2. ____________________________ (Name) ____________________________ (Phone)

Your Name: ____________________________
ARE YOU ABLE TO PERFORM THE FOLLOWING FUNCTIONS OF A POLICE OFFICER?

**Police Officer Job Description**

1. Patrols a designated area, either in a motorized vehicle or on foot, in order to prevent crime or disturbance of the peace and apprehend violators. Conducts surveillance. Makes police presence visible in order to deter crime. Familiarizes self with patrol area and notes hazards, suspicious persons, and circumstances therein to report to superior officer. Maintains ongoing radio contact as directed.

2. Responds to reported violations of regulator laws and ordinances including, but not limited to, drug violations, felonies, civil disturbances, domestic disturbances, and misdemeanors.

3. Enforces vehicle and limited traffic laws; writes notices; and serves court writs.

4. Conducts preliminary investigations of crimes, accidents, and civil disturbances; gathers evidence and protects the crime scene until relieved by the appropriate superior officer or investigatory unit. May administer first aid, locate, question, and detain witnesses; pursues, apprehends, arrest, interrogates, and transports suspects and offenders as necessitated by circumstances; testifies and presents evidence in court.

5. Observes, inspects, and reports the condition of CMHA property, noting any hazardous conditions; inspects and maintains department equipment.

6. Writes crime reports and other required reports; completes forms describing circumstances of crimes, accidents, investigations, complaints and other police activities.

7. May perform functions of specialized police operations including, but not limited to specific street activities, narcotics enforcement, scientific duties, and clerical tasks in support of street personnel.

_ X _ YES, I AM ABLE TO PERFORM THE JOB FUNCTIONS LISTED ABOVE

_ _ NO, I AM NOT ABLE TO PERFORM THE JOB FUNCTIONS LISTED ABOVE

[Signature]

[Date] 10/5/2014
DECLARATION REGARDING MATERIAL ASSISTANCE/NONASSISTANCE TO A TERRORIST ORGANIZATION

This form serves as a declaration of the provision of material assistance to a terrorist organization or organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List (see the Ohio Homeland Security Division website for a reference copy of the Terrorist Exclusion List).

Any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided. Failure to disclose the provision of material assistance to such an organization or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree.

For the purposes of this declaration, "material support or resources" means currency, payment instruments, other financial securities, funds, transfer of funds, and financial services that are in excess of one hundred dollars, as well as communications, lodging, training, safe houses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials.

### DECLARATION

In accordance with division (A)(2)(b) of section 2909.32 of the Ohio Revised Code

For each question, indicate either "yes," or "no" in the space provided. Responses must be truthful to the best of your knowledge.

1. Are you a member of an organization on the U.S. Department of State Terrorist Exclusion List?
   □ Yes  ☒ No

2. Have you used any position of prominence you have with any country to persuade others to support an organization on the U.S. Department of State Terrorist Exclusion List?
   □ Yes  ☒ No

3. Have you knowingly solicited funds or other things of value for an organization on the U.S. Department of State Terrorist Exclusion List?
   □ Yes  ☒ No

HLS 0037 2/06
PUBLIC EMPLOYMENT - CONTINUED

4. Have you solicited any individual for membership in an organization on the U.S. Department of State Terrorist Exclusion List?
   □ Yes  ☑ No

5. Have you committed an act that you know, or reasonably should have known, affords "material support or resources" to an organization on the U.S. Department of State Terrorist Exclusion List?
   □ Yes  ☑ No

6. Have you hired or compensated a person you knew to be a member of an organization on the U.S. Department of State Terrorist Exclusion List, or a person you knew to be engaged in planning, assisting, or carrying out an act of terrorism?
   □ Yes  ☑ No

In the event of a denial of public employment due to a positive indication that material assistance has been provided to a terrorist organization, or an organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List, a review of the denial may be requested. The request must be sent to the Ohio Department of Public Safety's Division of Homeland Security. The request forms and instructions for filing can be found on the Ohio Homeland Security Division website.

CERTIFICATION

I hereby certify that the answers I have made to all of the questions on this declaration are true to the best of my knowledge. I understand that if this declaration is not completed in its entirety, it will not be processed and I will be automatically disqualified. I understand that I am responsible for the correctness of this declaration. I understand that failure to disclose the provision of material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List, or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree. I understand that any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided by myself or my organization.

Signature: [Signature]   Date: 10 Jux 2014
July 10, 2014

Dear Applicant:

Robert  
First  Last Name

Congratulations! You have passed Phase I, the Written Examination, of the eligibility process for the position of Police/Reserve Officer with the Cuyahoga Metropolitan Housing Authority Police Department. Your score on the written examination is 78% which meets or exceeds the minimum score requirement of 70%.

We invite you to participate further in the selection process today, which is Phase II — the Physical Agility Test, if applicable.

So, please have a seat and we will escort you to your interview shortly.

Thank you for your cooperation.

Sincerely,

CMHA Police Department
Personnel and Recruitment

Jeffery K. Patterson, Chief Executive Officer/Safety Director

CMHA provides reasonable accommodations to persons with disabilities. If you need an accommodation including auxiliary aids and services, please contact
AFFIDAVIT

STATE OF OHIO
COUNTY OF CUYAHOGA  }

SS: [Redacted]

Robert A. Celesz
[Name]
of [Redacted], having been sworn
[Address]
deposed under oath, states that he formally requests the Division of Police, Department of Public Safety of
the City of Cleveland, to release all police records concerning himself, including records of arrest and other
miscellaneous records to,

[Cuyahoga Metropolitan Housing Authority]
[Name of organization to whom records are to be released]

The undersigned applicant, in making this request, specifically waives and gives up any right of
personal privacy he might have in arrest records concerning himself and releases the City of Cleveland and
the Division of Police thereof from any liability whatsoever resulting from the release of said records at his
request. He further waives any right of action against the City of Cleveland and Division of Police
concerning any matters resulting from the release of said records at his request.

Robert A. Celesz
[Name of Applicant-Affiant], having been duly sworn under oath, states this is his lawful affidavit
and request for release of records.

[Signature]

Sworn To and Subscribed before me, a Notary Public, this 10th day of July, 2014

SEAL MUST BE AFFIXED

Notary Public
[Print Name]
[Print Address]

[Out of State Notary Must Submit Certificate]
Cuyahoga Metropolitan Housing Authority

POLYGRAPH/VOICE STRESS ANALYSIS EXAMINATION RELEASE

For employment consideration by the Cuyahoga Metropolitan Housing Authority, I hereby agree to take any pre-employment polygraph [lie detector] and/or voice stress examination which the agency requires.

It is my understanding that the questions asked in this pre-employment examination will relate to information provided in my employment application and the following subject matters: Employment History, Criminal History, Theft Offenses, Narcotics Use, Alcohol Abuse, Sexual Misconduct, and Honesty.

Signature

Date

Print name

NOTARY PUBLIC

Sworn to and subscribed before me, a Notary Public, this 10 day of July 2014

Notary Public Signature

PAULA STYLES
NOTARY PUBLIC • STATE OF OHIO
Recorded in Cuyahoga County
My commission expires May 13, 2017

SEAL MUST BE AFFIXED
Cuyahoga Metropolitan Housing Authority
Police Department

RELEASE OF ALL CLAIMS

Know all men by these presents that I, the undersigned, for valuable consideration, the adequacy and sufficiency of which is hereby specifically acknowledged, do for myself, my heirs, personal representatives, successors, and assigns by these presents, forever fully, and completely release the Cuyahoga Metropolitan Housing Authority, Cuyahoga Metropolitan Housing Authority Police Department (CMHAPD), its officers, officials, agents, employees, and servants, from any and all claims, demands, liability, and causes of action on account of or in any way arising out of or relating to my participation in the physical agility test associated with the application process for the position of ___________ with the CMHAPD.

The undersigned warrants and represents that I have fully read and understand this release, and that it is executed without reliance upon any statement or representation by the persons releases or their attorney, and that I am of full age and legally competent to sign this release as my own free act this ______ day of _______.

ROBERT A. Lenz Jr. 10JUL2014
Print Name Date

Signature Date

Sworn to and subscribed before me, a Notary Public, this ______ day of _______.

PAUL A. STYLES
Notary Public
My Commission Expires

SEAL MUST BE AFFIXED
CUYAHOGA METROPOLITAN HOUSING AUTHORITY

DIVISION OF POLICE

BACKGROUND INVESTIGATION

APPLICANTS NAME: Rob Lenz

DATE OF INVESTIGATION: 13AUG14

AREA BEING VERIFIED: Home/Neighbor Visit

INVESTIGATORS COMMENTS:
On the above date at 1545hrs, I conducted a home interview at 3409 W. 49th St with Rob Lenz, his father Rob Lenz Sr and his mother Elizabeth. I found the home neat and well kept. I spoke with Lenz parents and they were proud of their son for his accomplishments and career decision. The Lenz's have lived in this community since 1993.

Resident at 3407 W. 49th St - Abraham - stated that the finally was quiet and there was never any trouble there. Abraham stated that the son (Rob Lenz/applicant) was also quiet and never caused any trouble. Abraham said he has lived in this community for the last 7yrs. This home is located directly next to the applicants home.

No other neighbors wished to comment or were not available.

ATTACHMENTS (IF ANY):

________________________________________

RATING: X SATISFACTORY _____ UNSATISFACTORY

INVESTIGATORS SIGNATURE

[Signature]

REV10JAN03
CUYAHOGA METROPOLITAN HOUSING AUTHORITY

DIVISION OF POLICE

BACKGROUND INVESTIGATION

APPLICANTS NAME: Rob Lenz

DATE OF INVESTIGATION: 14AUG14

AREA BEING VERIFIED: References

INVESTIGATORS COMMENTS:
On 14AUG14 I spoke with Sgt. Kyle White of CMHA PD - dependable, thinks he will be a good learner, never know him to be a bad person. States he is trustworthy. Has known Rob for 3-4 years. Would recommend him for a job at CMHA PD.

On 14AUG14 I spoke with Johnathan Pacholke of RTA Police and Army National Guard - known him for 3yrs. Describes him as good person, good heart, always friendly, knows how to talk to people, dedicated, made big change while in Army. Never known to abuse drugs or alcohol. Would recommend him to be a police officer. Grew up in Cleveland. Street savvy.

On 14AUG14 I spoke with Sgt. Kevin Zimmerman of the US Army National Guard - known him for 2yrs. Describes him as punctual, good character, tries very hard to excel at anything he does even when not successful at first attempt. Never known to abuse drugs or alcohol. As a soldier he is great. Even puts in work on his own time to excel at tasks he has difficult time with. Very good work ethic. Self-sufficient, can be trusted to do things with little to no supervision. Respects chain of command. Would recommend him to be a police officer.

ATTACHMENTS (IF ANY):


RATING: X SATISFACTORY  UNSATISFACTORY

INVESTIGATORS SIGNATURE

[Signature]

REV10JAN03
CUYAHOGA METROPOLITAN HOUSING AUTHORITY
DIVISION OF POLICE
BACKGROUND INVESTIGATION

APPLICANTS NAME: Rob Lenz

DATE OF INVESTIGATION: 14AUG14

AREA BEING VERIFIED: Work History

INVESTIGATORS COMMENTS:
On 14AUG14 I spoke with Laura Vath HR Manager of Solution Industries:
- becoming a police officer was always high on his to do list
- happy with work ethic
- good guy
- could master any task he was given
- would recommend him as a police officer
- always on time and always came to work
- no discipline history

On 14AUG14 I spoke with Auto Zone Commercial Manager Frankie Roush:
- work ethic is great
- dependable
- reliable
- puts heart into his job
- no discipline history
- always on time and always comes to work
- would highly recommend him to be a police officer
- calm cool head

On 14AUG14 I spoke with Staff Sergeant Senger of the US Army:
- work ethic is top notch
- one of the best privates hes ever had
- proactive
- dependable/reliable
- no discipline history
- always on time always reports for drill
- operates well under stress
- would recommend him to be a police officer

ATTACHMENTS (IF ANY):


RATING: X SATISFACTORY UNSATISFACTORY

INVESTIGATORS SIGNATURE

REV10JAN03
CUYAHOGA METROPOLITAN HOUSING AUTHORITY  
DIVISION OF POLICE  
BACKGROUNĐ INVESTIGATION  
COMPOSITE  

APPLICANTS NAME: Rob Lenz

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<th></th>
<th>SATISFACTORY</th>
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<td>A. Criminal History and Driving Record</td>
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<td>B. Home Visit</td>
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<td>C. Neighbor Interviews</td>
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<tr>
<td>D. Credential Verification</td>
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<td>E. Prior Work History</td>
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<tr>
<td>F. Application Form Information Verification</td>
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<tr>
<td>G. Personal References</td>
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Background Investigation Complete  
Yes x  No __________

I do recommend for employment based upon information verified during Background Investigation.

Investigators Signature  
Date  14AUG14

I do not recommend for employment based upon information verified during Background Investigation.

Investigators Signature  
Date
CUYAHOGA METROPOLITAN HOUSING AUTHORITY
DIVISION OF POLICE

BACKGROUND INVESTIGATION

APPLICANTS NAME: Rob Lenz

DATE OF INVESTIGATION: 14AUG14

AREA BEING VERIFIED: Education/Credentials

INVESTIGATORS COMMENTS:
On 14AUG14 I verified Lenz diploma with the Cleveland Municipal School District.

On 14AUG14 I verified Lenz OPOTA completion with Britany Thompson, Certification Officer, of OPOTA. Certification was completed at Hocking College #BAS 14-003.

ATTACHMENTS (IF ANY):
OPOTA Letter, Diploma

RATING: X SATISFACTORY _____ UNSATISFACTORY

INVESTIGATORS SIGNATURE

REV 10JAN03
Grade Symbols:
Grade: Value:
A 4.0
A - 3.7
B + 3.3
B 3.0
B - 2.7
C + 2.3
C 2.0
C - 1.7
D + 1.3
D 1.0
D - 0.7
F 0.0

Explanatory Symbols not used in calculation of Grade Point Average:
S Satisfactory
U Unsatisfactory
AU Audit
I Incomplete (Converts to "F" or "U" at the end of the 8th week of the following term)
DP Course Dropped After the Census Day of the Term
W Student Withdrawn from the College
*CE Credit by Examination
*CA Credit by Advanced Standing
*CL Credit by Life Experience
*CS Course Substitution
*T Transfer Credit Awarded

Academic Probation and Dismissal Qualifications:
Credits Minimum
Attempted: GPA:
6-11 1.500 (in any single term)
12-19 1.500
20-29 1.600
30-49 1.750
50 or more 2.000

Dismissal possible following two consecutive terms of Probation.
Dismissal possible if student has below a .750 GPA after completing 20 credits.

Academic Transcript Explanation of Totals:
All Term and Cumulative Averages are based on Courses with final grades A,B,C,D,F (+/-).

Term GPA and Credits (Attempted credits divided into quality points earned)
This point average reflects the value of all courses attempted during the term along with credits earned for this term. Courses must have a final grade awarded to be counted in the total and must have one of the following grade symbols: A,B,C,D,F (+/-) or S,CE,CA,CL.

Cum GPA and Credits (Attempted credits divided into quality points earned)
This cumulative point average reflects the value of all courses attempted to date along with total credits earned to date. Courses must have a final grade awarded to be counted in the total and must have one of the following grade symbols: A,B,C,D,F (+/-) or S,CE,CA,CL.

Awards and Certifications:
Degree's and Diploma's
These awards are noted at the end of the term in which the student earns the degree or diploma as determined by departmental reviews of courses successfully completed.

Certificates (Occupational Completion, Technical):
These awards are noted at the end of the term in which the student earns the certificate. These certificates are achieved by completing defined sequences or groups of courses. Definitions are maintained by Academic Affairs.

Dean's List
If the student qualifies, a transcript notation appears under that term and cumulative totals. A Dean's List student qualifies by achieving a 3.5 College GPA for the term with at least 12 credits attempted and all credits completed. Awarded based on GPA at the time when final grades are processed.

President's Award
If the student qualifies, this message is printed at the end of the term in which the student receives the award. This is a notification from the President's Office. Award is posted on the transcript when the student earns a degree.

Trustee's Award
If the student qualifies, this message is printed at the end of the term in which the student receives the award. This is a notification from the President's Office. Award is posted on the transcript when the student earns a degree.

Phi Theta Kappa
Alpha Mu Delta Chapter (Hocking College Main Campus), Beta Lambda Nu Chapter (Hocking College Perry Campus), Beta Sigma Omega (Hocking College Energy Institute).
If the student qualifies, this message is printed at the end of the term in which the student receives the award. Club coordinator determines qualifying students. Award is posted on the transcript when the student earns a degree.

Kappa Beta Delta
Tau Chapter
If the student qualifies, this message is printed at the end of the term in which the student receives the award. Business Department determines qualifying students. Award is posted on the transcript when the student earns a degree.
TO: George Coulter, Executive Officer

FROM: Gregory Drew, Sergeant

CVSA Exam – Robert Lenz

On September 18, 2014, I conducted a pre-employment Computer Voice Stress Analyzer (CVSA) test on police officer candidate Robert Lenz.

Prior to the exam, Lenz completed a background investigation personal history statement. Upon reviewing this statement and a subsequent interview with Lenz, I learned the following:

1. Lenz reported that he was terminated from employment while employed at Performance Bike. Lenz was a sales manager and had a disagreement with his supervisor. Lenz was 18 years old when this occurred.
2. Lenz marked “yes” for ever being involved in a hit skip. During the interview, Lenz reported that he was 17 years old and was driving on I-90 when he was sideswiped. Both parties exited the freeway and stopped at a BP gas station. They exchanged information and the other party went inside the station to get change to use the pay phone. Lentz then drove away after some time passed. Two weeks later he received a letter from a Cleveland Police Second District Detective indicated that he was involved in a hit skip and needed to come in and give a statement. Lenz responded to the District and gave a statement. He was never charged and the insurance companies worked out a resolution.
3. Lenz reported that he tried marijuana 1 time when he was 20 years old. (2008) He reported that it was his girlfriend’s birthday and they were at a party. He became ill after smoking the marijuana and vomited for 2 hours. After that he had no interest in using marijuana again.

I conducted the attached exam according to my training and certification.

CONCLUSION

Based upon my training and experience, it is my opinion that the subject did respond truthfully to the relevant questions. I obtained a second opinion from the CVSA Fact Scoring Algorithm which concurred with my findings.

Respectfully,

Sgt. Gregory Drew
October 08, 2014

CMHA POLICE DEPARTMENT
5715 WOODLAND AVE
CLEVELAND OH 44104

CRIMINAL HISTORY RECORD CHECK
NO FBI CONVICTIONS ON FILE
AUTHENTICATION NO. CS01042149DC5517
ICN.E2014280000000083306

The Federal Bureau of Investigation (FBI) has completed a criminal history record check on the applicant listed below.

There are no convictions on file with this office for this applicant.

Name: LENZ JR, ROBERT
Date of Birth: March 17, 1988
SSN:
FBI Completion Date: October 07, 2014
Reason Fingerprinted: LAW

This letter is valid for one year from the record check completion date. This letter may be photocopied by the prospective employer and retained by the applicant.

Thomas J. Stickrath, Superintendent
Ohio Bureau of Criminal Investigation

Pursuant to Ohio Revised Code section 109.57(E)(2), BCI can only provide information relating to the criminal convictions and guilty pleas. BCI is also only permitted to provide information regarding juvenile adjudications if the adjudication was for Aggravated Murder, Murder, or for a sex offense for which the offender still has a duty to register.
October 08, 2014

CMHA POLICE DEPARTMENT
5715 WOODLAND AVE
CLEVELAND OH 44104

CRIMINAL HISTORY RECORD CHECK
NO BCI CONVICTIONS ON FILE
AUTHENTICATION NO. CS01042149DC5517

The Ohio Bureau of Criminal Investigation (BCI) has completed a criminal history record check on the applicant listed below.

When authorized by law, an individual may have their criminal history sealed. In the event that an applicant has a sealed record, certain parties are permitted to receive such information to determine whether an applicant is legally disqualified from performing specific work.

Sealed records are disclosed based upon the Reason Fingerprinted, as submitted on the background check transaction and listed below. Sealed criminal histories will be provided in a manner consistent with the reason that the records are requested, regardless of the destination of the result.

There are no convictions on file with this office for this applicant.

Name:           LENZ JR, ROBERT
Date of Birth:  March 17, 1988
SSN:            [Redacted]
BCI Completion Date: September 13, 2014
Reason Fingerprinted: LAW

This letter is valid for one year from the record check completion date. This letter may be photocopied by the prospective employer and retained by the applicant.

Thomas J. Stickrath, Superintendent
Ohio Bureau of Criminal Investigation

Pursuant to Ohio Revised Code section 109.57(E)(2), BCI can only provide information relating to the criminal convictions and guilty pleas. BCI is also only permitted to provide information regarding juvenile adjudications if the adjudication was for Aggravated Murder, Murder, or for a sex offense for which the offender still has a duty to register.
CUYAHOGA METROPOLITAN HOUSING AUTHORITY

DIVISION OF POLICE

BACKGROUND INVESTIGATION

APPLICANTS NAME:  Rob Lenz

DATE OF INVESTIGATION:  13AUG14

AREA BEING VERIFIED:  Criminal History/Driving Record

INVESTIGATORS COMMENTS:
A check of Lenz criminal history (CCH) revealed no criminal history. His driving record revealed 4 violations since he has been an adult. Those violations range from 2005 to 2011. They are as follows:
- Speed 2/20/2011
- Stop Sign 1/26/2009
- Traffic Control Devices 09/19/2007
- Stop Sign 10/17/2006
He has had no violations in the last 3 years.

A check of Cleveland Police Departments Warrant has revealed no active warrants.

ATTACHMENTS (IF ANY):
OHLEG, CCH, CPD WARRANT SHEET

RATING:  X Satisfactory  ____ Unsatisfactory

INVESTIGATORS SIGNATURE

REV10JAN03
May 5, 2015

Mr. Robert Lenz
918 Carriage Hill Drive
Athens, OH 45701

Dear Mr. Lenz:

The Cuyahoga Metropolitan Housing Authority (CMHA) is pleased to extend this offer of employment to you for the position of Police Officer at a rate of $13.76 per hour. Your appointment is subject to satisfactorily passing CMHA's post-offer, pre-employment physical exam, including a substance abuse test, and a background check.

Benefits include your choice of single or family hospitalization plans and prescription drug, dental and vision coverage. The plans are effective 90 days after your date of employment and you are required to contribute toward of the total monthly premium cost. A $25,000 Agency paid life insurance policy is provided after one (1) year of continuous service. Regular full-time employees are qualified for two (2) weeks paid vacation, and fifteen (15) sick days. You are entitled to two (2) personal days after successful completion of your initial introductory period. CMHA employees are provided retirement benefits under Ohio's Public Employees Retirement Systems (PERS). If you have prior years of service with any State of Ohio retirement system, please furnish proof of employment within 60 days of your employment for proper vacation accrual and transfer of sick leave hours. The information regarding the amount of transferred sick leave hours will be discussed further during new hire orientation.

Under the Social Security Protection Act of 2004, state and local government employees must be informed that your earnings from this job are not covered by Social Security. When you retire, the pension you receive from OPERS may affect the amount of the Social Security benefit you receive, if you are entitled to a Social Security benefit. This information will be discussed further during new employee orientation.

Your position of Police Officer is in the bargaining unit represented by The Fraternal Order of Police, Ohio Labor Council, Inc. Your wages, benefits and other terms and conditions of employment are governed by the current contract between the Union and CMHA.

In your position of Police Officer, you will work under the general direction of the Patrol Commander, in accordance with CMHA policy, must satisfactorily complete a Twelve (12) month introductory period.

Please reply to this offer of employment in writing and retain a copy for your records. Upon receipt of your acceptance, a Human Resources Representative will contact you to schedule your physical exam and determine an agreeable start date.

Finally, this offer letter of employment is not an employment contract nor is it intended to create any contractual or employment obligations beyond those set forth in the current contract between the Union and CMHA.

Please contact me at (216) 271-2258 if you have any questions.

Sincerely,

Betsy McCafferty
Director of Human Resources

Accept: _____________________________ Date: __________/________/2015

Decline: _____________________________ Date: __________/________/2015

Jeffry K. Patterson, Chief Executive Officer, Cuyahoga Metropolitan Housing Authority

CMHA provides reasonable accommodations to persons with disabilities. If you need an accommodation, including auxiliary aids and/or services, please contact CMHA's Section 504/ADA Coordinator at 216-348-5000 (voice) or 1-800-750-0750 (Ohio Relay Service).
EMPLOYEE
CHANGE OF NAME OR ADDRESS FORM

Social Security Number (Last 4 digits): ________

Department: Police

New Name: __________________________ (Please attach appropriate documentation)

New Address: __________________________ Street

______________________________ City/State/Zip Code

Telephone Number: __________________________

Effective Date: 1/17/2019

Employee Signature

Date Completed: 3/12/2022

The completed form with the appropriate documentation attached may be faxed or mailed to:

CMHA
Attention: Human Resources Department
8120 Kinsman Road
Cleveland, Ohio 44104
Fax: (216) 348-8236
### HONESTY / INTEGRITY

**Core Values:**
Behaves in an honest, fair and ethical manner; shows consistency in words and actions; holds oneself to the highest level of ethical standards; shares information accurately, completely and appropriately.

**Accountability & Tenacity**

- [ ] Exceeds Expectations
- [X] Meets Expectations
- [ ] Needs Improvement

**Comments:**
PO Lenz acts in a fair and ethical manner when completing reports or calls for service. Shares information with others with information he receives.

### COMMUNICATIONS

**Core Values:**
Ability to express ideas and concepts clearly; effective in writing using correct grammar and structure; ability to understand and execute instructions; ability to convey thoughts and express ideas effectively; attends to and fully comprehends what others are saying; ability to understand and execute verbal instructions.

**Respect & Understanding**

- [ ] Exceeds Expectations
- [X] Meets Expectations
- [ ] Needs Improvement

**Comments:**
PO Lenz communicates well with others and expresses views when needed when he has ideas to get improved results.

### INTERPERSONAL SKILLS

**Core Values:**
Interacts positively with others; treats others with courtesy, sensitivity, and respect; considers the feelings of people in different situations; demonstrates politeness and empathy; builds constructive relationships; ability to cooperate and effectively communicate with residents, colleagues, supervisors, and outside stakeholders; works to achieve common goals.

**Respect & Understanding**

- [ ] Exceeds Expectations
- [X] Meets Expectations
- [ ] Needs Improvement

**Comments:**
PO Lenz interacts well with other officers and treats residents and victims and the general public with respect to achieve that everyone is being treated fairly.
### SERVICE

**Core Values:**
- Excellence / Respect / Service

- **Exceeds Expectations**
- **Meets Expectations**
- **Needs Improvement**

**Comments:**
PO Lenz acts in a professional manor and always assisting residents any way he can while on calls or interacting with them in an official capacity and listens to what they have to say and does not react in a negative way.

### JOB KNOWLEDGE

**Core Values:**
- Excellence & Training

- **Exceeds Expectations**
- **Meets Expectations**
- **Needs Improvement**

**Comments:**
PO Lenz has very good knowledge of state/city laws including case law and also shares that knowledge with senior officers as well as new officers as a field training officer.

### PRODUCTIVITY

**Core Values:**
- Commitment / Tenacity / Service

- **Exceeds Expectations**
- **Meets Expectations**
- **Needs Improvement**

**Comments:**
PO Lenz strives to contribute to the dept and works well with his fellow officers. He completes all task assigned to him and takes several training classes throughout the year to better himself.
## TEAMWORK

**Core Values:**

Commitment & Tenacity

Willingly cooperates and works collaboratively toward solutions that generally benefit all involved parties and accomplish group objectives; actively participates as a member of the team.

**Comments:**

- Exceeds Expectations
- X Meets Expectations
- Needs Improvement

PO Lenz works well with others to complete assignments and calls for service when he is given them and will assist officers without being asked to and steps up when needed.

## ATTENDANCE

**Core Values:**

Accountability & Understanding

Meets all CMHA policies and standards for attendance and punctuality; has a thorough understanding of CMHA timekeeping policies and procedures; reports to scheduled training classes and/or meetings on time and prepared.

**Comments:**

- Exceeds Expectations
- X Meets Expectations
- Needs Improvement

PO Lenz only called off sick for 2 days in 2018.

## FOR SUPERVISORS:

## COACHING & MENTORING

**Core Values:**

Accountability & Training

Provides timely guidance and feedback to help others strengthen specific knowledge/skill, reinforces efforts and progress; provides instruction, positive role modeling, and opportunities for learning; clarifies expected behaviors and levels of proficiency by seeking and giving information and checking for understanding.

**Comments:**

- Exceeds Expectations
- Needs Improvement

## LEADERSHIP

**Core Values:**

Accountability & Tenacity

Creates a vision or goal and communicates in a way that motivates others to implement it; accepts responsibilities and acts on them; develops trust and credibility; expects honest and ethical behavior of self and others; creates opportunities for success.

**Comments:**
### Inclusiveness

**Core Values:**

- Commitment / Understanding / Respect

**Shows respect for people and their differences; promotes fairness and equality; engages the talents, experiences, and capabilities of others; fosters a sense of belonging; works to understand the perspectives of others.**

**Comments:**

- [ ] Exceeds Expectations
- [ ] Meets Expectations
- [ ] Needs Improvement

### Managing Resources

**Core Values:**

- Excellence & Safety

**Allocates time and resources efficiently and effectively; prioritizes work and delegates as appropriate; implements processes and works to significantly reduce risk to CMHA.**

**Comments:**

- [ ] Exceeds Expectations
- [ ] Meets Expectations
- [ ] Needs Improvement

### Judgment & Decision Making

**Core Values:**

- Commitment / Understanding / Safety

**Keeps the mission at the forefront of decision making and action; ability to make decisions authoritatively and wisely; understands CMHA’s mission and prioritizes goals; considers the impact of actions or decisions on residents and the Authority; refrains from jumping to conclusions, and takes time to collect facts before making decisions.**

**Comments:**

- [ ] Exceeds Expectations
- [ ] Meets Expectations
- [ ] Needs Improvement

### Overall Appraisal

- [ ] Exceeds Expectations
- [X] Meets Expectations
- [ ] Needs Improvement

**Member’s signature and date:**

[Signature]

[Date] 21.03.19
Appendix B
Performance Evaluation Signature Page

Employee being evaluated: POLENZ #52

Immediate Supervisor: Ray Zeno 658 Date of Review: 10-03-17

Comments:

Lieutenant: Carol Rucker Date of Review: 11-06-17

Comments: POLENZ has shown leadership skills. He is a team player.

Commander: MEL Date of Review: 2-13-17

Comments:

Deputy Chief: Date of Review: 2-14-17

Comments:

Chief: Date of Review: 2/16/2017

Comments:
Manager Evaluation Instructions
Lenz Jr., Robert

<table>
<thead>
<tr>
<th>Employee Id</th>
<th>3407</th>
<th>Name</th>
<th>Lenz Jr., Robert</th>
</tr>
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<tr>
<td>Job Title</td>
<td>Police Officer</td>
<td>Job Id</td>
<td>07101</td>
</tr>
<tr>
<td>Job Grade</td>
<td>1</td>
<td>Supervisor</td>
<td>Morgan, Ray</td>
</tr>
</tbody>
</table>

Competencies

1.C. Honesty/Integrity (Value: Commitment)

**Description**
Behaves in an honest, fair and ethical manner; Shows consistency in words and actions; Holds oneself to the highest level of ethical standard within the industry; Shares information accurately, completely and appropriately.

**Self Rating**
3 - Exceed Expectations

**Self Comment**

**Rating**
2 - Meets Expectations ✓

**Comment**
PO Lenz is an honest person and is also ethical. He is fair and he shares any/all information that would effect the department with his peers and supervisors.

2.A. Dependability, Adaptability/Flexibility (Value: Accountability)

**Description**
Dependability: Takes personal responsibility for the quality and timeliness of work and achieves results with little oversight; Follows through on commitments; Implements decisions that have been agreed upon; Maintains confidentiality with sensitive information; Acknowledges and learns from mistakes without blaming others; Recognizes the impact of one's behavior on others. Adaptability/Flexibility: Adapts to changing business needs, conditions and situations in a positive manner; Displays openness to training and application of new skill; Displays and ongoing commitment to learning and self-improvement.
Manager Evaluation Instructions: Lenz Jr., Robert

Self Rating 2 - Meets Expectations
Self Comment

Rating 2 - Meets Expectations ✓
Comment PO Lenz is dependable and comes to work on time prepared to work. Lenz had some issues writing clear/complete reports but has corrected those issues. He listens and learns from constructive criticism open to suggestions.

2.A. Written/Verbal Communication, Comprehension/Listening (Value: Accountability)

Description Written Communication/Comprehension: Demonstrates the ability to express ideas, thoughts, and concepts clearly and effectively in writing using correct and appropriate grammar, organization and structure; Demonstrates the ability to understand and execute written instructions. Verbal Communication/Listening: Demonstrates the ability to convey thoughts and express ideas effectively using speech in individual or group settings; Attends to and fully comprehends what others are saying; Demonstrates the ability to understand and execute verbal instructions.

Self Rating 2 - Meets Expectations
Self Comment

Rating 2 - Meets Expectations ✓
Comment As stated above PO Lenz had some issues writing reports but the majority of those issues have been corrected. He does understand instructions and completes them in a timely manner.

3.R. Interpersonal Skills, Relationship Building (Value: Respect)

Description Interpersonal Skills: Ability to interact positively and to relate with others; Treats others with courtesy, sensitivity, and respect. Considers and responds to the needs and feelings of different people in different situations; Demonstrates politeness and empathy in interactions with others. Relationship Building: Builds constructive working relationships characterized by a high level of acceptance, cooperation, and mutual respect; Exhibits a high level of willingness and ability to cooperate and effectively communicate with residents, colleagues, supervisors,
Manager Evaluation Instructions: Lenz Jr., Robert

and outside vendors; Works to achieve common goals.

Self Rating 2 - Meets Expectations
Self Comment Rating 2 - Meets Expectations ✓
Comment PO Lenz interacts positively with his co-workers and other people in comes into contact with. Lenz has good working relationships with his peers and supervisors.

3.R. Service Orientation (Value: Respect)

Description Acts professionally and calmly at all times when interacting with others; Consistently demonstrates concern and courtesy towards others; Treats all people fairly and respectfully at all times; Responds to customer needs within agree time frames; Addresses conflicts and problem situations with patience and tact.

Self Rating 2 - Meets Expectations
Self Comment Rating 2 - Meets Expectations ✓
Comment PO Lenz acts professionally when interacting with others and he treats people with respect/courtesy. He also shows concern to others when addressing problems that he sees.

4.E. Job Knowledge (Value: Excellence)

Description Ensures job knowledge and skills are current and valuable; Demonstrates ability to apply practical and/or technical knowledge to specific tasks/assignments; Demonstrates job knowledge through ability to successfully execute duties outline the the job description.
Manager Evaluation Instructions: Lenz Jr., Robert

Self Rating 2 - Meets Expectations
Self Comment PO Lenz has good knowledge of his job and keeps that knowledge current. He also successfully executes all of the duties assigned to him in a timely manner.

Rating 2 - Meets Expectations ✓
Comment PO Lenz complete all of his assignments in a timely manner and strives to be complete and accurate as possible. Lenz corrects any discrepancy that may be found in his work and learns from any mistake.

4.E. Productivity, Quality of Work (Value: Excellence)

Description Productivity: Strives to consistently produce high quality results in an efficient and timely manner; Maintains focus and perseveres in the face of obstacles; Uses time efficiently and responds quickly and constructively when confronted with challenges; Prioritizes tasks based on importance/urgency. Quality of Work: Extent to which work outputs match quality standards/set expectations; Completes all tasks/assignments successfully and with a high level of proficiency; Correct any and all errors and learns from them to reduce future errors; Strives to consistently deliver high level of quality/product/service to all clients/residents/colleagues/supervisors.

Self Rating 2 - Meets Expectations
Self Comment
Rating 2 - Meets Expectations ✓
Comment

4.S. Consistency/Compliance, Detail Orientation (Value: Safety)

Description Consistency/Compliance: Follows departmental and Agency-wide workplace safety standards and CMHA regulations; Understand and adheres to all workplace policies as states in the AO11; Adheres to all workplace and trade safety laws, regulations, standards and practices. Detail Orientation: Follows departmental and Agency-wide workplace safety standards and CMHA regulations; Understand and adheres to all workplace policies as states in
Manager Evaluation Instructions: Lenz Jr., Robert

the AO11; Adheres to all workplace and trade safety laws, regulations, standards and practices.

**Self Rating**
2 - Meets Expectations

**Self Comment**

**Rating**
2 - Meets Expectations ✓

**Comment**
PO Lenz follows all CMHA Rules and regulations as well as any safety standards that are in place.

**5.C. Teamwork (Value: Commitment)**

**Description**
Willingly cooperates and works collaboratively toward solutions that generally benefit all involved parties and accomplish group objectives; Actively participates as a member of the team.

**Self Rating**
2 - Meets Expectations

**Self Comment**

**Rating**
2 - Meets Expectations ✓

**Comment**
PO Lenz is a team member and works willingly with other member to accomplish any/all goals.

**6.A. Attendance/Punctuality (Value: Accountability)**

**Description**
Consistently meets all CMHA policies and standards for attendance and punctuality; Has a thorough understanding of CMHA timekeeping policies and procedures; Reports to scheduled training classes and/or meetings on time and prepared.

**Self Rating**
2 - Meets Expectations

**Self Comment**

**Rating**
2 - Meets Expectations ✓
Manager Evaluation Instructions: Lenz Jr., Robert

Comment
PO Lenz comes to work on time and meets CMHAPD timekeeping policies. Lenz attends any/all training on time and is eager to participate.

7.R. Positive Attitude (Value: Respect)

Description
Has a positive disposition towards others and their job/work; Spreads optimistic outlook to others; Continues to be upbeat even when a situation is not ideal.

Self Rating
2 - Meets Expectations

Self Comment

Rating
2 - Meets Expectations ✓

Comment
PO Lenz has an upbeat/positive attitude when he is at work and spreads his optimism to other members.

8.E. Customer Focus (Value: Excellence)

Description
Listens to customers/residents (internal or external) and addresses needs and concerns; Keeps customers informed by providing status reports and progress updates; Delivers on service commitments; Meets established or agreed upon deadlines; Maintains supportive relationships with customers; Uses initiative to improve outcomes, processes or measurements.

Self Rating
2 - Meets Expectations

Self Comment

Rating
2 - Meets Expectations ✓

Comment
PO Lenz listens to others concerns and takes the necessary steps to address those concerns. He also advises his supervisors of any concerns that they might need to be aware of.
Manager Evaluation Instructions: Lenz Jr., Robert

9. Safety Culture/Awareness (Value: Safety)

Description: Identifies and seeks to correct conditions that affect employee and resident safety; Upholds CMHA safety standards; Attends and actively participates in mandatory safety-related training courses; Promotes a culture of safety in his/her workplace and on the job.

Self Rating: 2 - Meets Expectations
Self Comment: 

Rating: 2 - Meets Expectations ✓
Comment: PO Lenz seeks to correct any/all condition that are a safety hazard to CMHA residents and employees. He also attends all training is assigned to go to.

Competencies

Self Rating: 2 - Meets Expectations
Self Comment: I hope to continue to learn and improve in my profession with training.
Rating: 2 - Meets Expectations ✓
Comment: PO Lenz consistently has an upbeat positive attitude and continues to improve his job knowledge. He also accepts any/all assignments he is given without hesitation.

Overall Rating & Comments

Self Rating: 2 - Meets Expectations
Self Comment: 
Manager Evaluation Instructions: Lenz Jr., Robert

Rating
Comment
2 - Meets Expectations
PO Lenz has a positive attitude towards his job and dedicated employee. He also reports to work on time and is respectful to his coworkers, supervisors and residents. Lenz has not received any discipline while employed at CMHA.

Employee Signoff

I hereby certify that I have read and reviewed this evaluation. Further, I understand that this document represents my performance appraisal for the past year. I also acknowledge that I have had time to consider this evaluation and make any appropriate responses. By signing this I acknowledge only receipt of the evaluation and do not imply agreement or certification of its contents. I understand I am responsible for handling any disputes about its contents with the Human Resources Department.

Comment

Signature

Date

22FEB17 2013 Hes.

Manager Signoff

Comment

Signature

Date

22FEB17 2013 HcS.
Cuyahoga Metropolitan Housing Authority
Employee Performance Appraisal

Employee Name: Robert Lenz #52
Employee Title: Police Officer
Last Four Digits of Social: [Redacted]
Department: Police

Supervisor Name: James Neal #668 SGT
Review Date: 22-Dec-2015

Evaluation Period: From 5-May-2015 To 31-Dec-15
Type: [ ] Supervisory [ ] Non-Supervisory [ ] Union

Instructions:
The Employee Performance Appraisal is a set time the employee and supervisor plan together to build on strengths and develop those areas needing improvement. Objectives for this process include:
1. Restate expectations about job responsibilities and performance standards
2. Evaluate job performance
3. Discuss future development opportunities and relate them to CMHA’s needs.

The general definition of each Performance Level is provided below. The Performance Levels are associated with the employee’s current job responsibilities and have been established with 12 overall Agency Performance Factors that relate to the employee’s daily job responsibilities. When appraising an employee determine the Performance Level for each Performance Factor. Comment are required. If necessary, additional pages may be attached to this Performance Appraisal.

Performance Levels:

**Exceeds Expectations**
Performance consistently exceeded expectations in all essential areas of responsibility and the quality of work overall is excellent. Performance demonstrates a skill level that exceeds the basic requirements of the position. Employees are viewed as role models by the rest of the Agency. They are innovative in their approach to work and are able to positively influence functions outside of their span of control.

**Meets Expectations**
Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames. Meets the expected levels of performance established by the supervisor.

**Improvement Needed**
Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.
PERFORMANCE FACTORS

Leadership

Drives positive and proactive attitudes within the work environment. Demonstrates high standards of integrity, ethical behavior, and confidentiality.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

Police Officer Lenz drives a positive proactive attitude within the work environment. He demonstrates high integrity and ethical behavior.

Comments:

Judgment/Decision Making

Gathers as much relevant information as possible prior to making job related decisions. Makes good decisions, based on experience and judgment, and checks with supervisor. Escalates critical issues; keeps supervisors informed of matters. Able to efficiently multi-task projects and assignments. Demonstrates proper judgment and control while operating agency vehicle or equipment.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

Police Officer Lenz gathers as much relevant information as possible prior to making job related decisions. Makes good decisions, based on experience and judgment, and checks with supervisor. Escalates critical issues; keeps supervisors informed of matters.

Comments:

Problem Solving

Identifies and reports potential problems, hazards and inconsistencies; makes suggestions to ensure full compliance. Suggests and develops creative approaches to assignments; resolves difficult issues encountered on the job.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

Police Officer Lenz identifies and reports potential problems, hazards and inconsistencies; makes suggestions to ensure full compliance.

Comments:
Accountability

Accepts responsibility and performs assigned duties in a transparent manner. Holds self and others accountable; sets priorities; accepts responsibility for mistakes and takes the initiative to correct them; complies with established control system and rules. Attends court when subpoenaed.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

Police Officer Lenz Accepts responsibility and performs assigned duties in a transparent manner. Holds self and others accountable and sets priorities.

Comments:

Interpersonal Relationships and Communication

Actively attends and conveys understanding of comments and questions of others; listens well in a group. Speaks clearly and expresses self well in groups and in one-on-one conversations and settings. Maintains effective courteous communication with co-workers, supervisors, subordinates and members of the public.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

Police Officer Lenz maintains effective courteous communication with co-workers, supervisors, subordinates and members of the public and speaks clearly and expresses self well in groups.

Comments:

Job Knowledge and Skills

The practical/technical skills and information used on the job. The demonstrated ability to execute the duties outlined on the job description. Demonstrates knowledge of laws, ordinances and written directives.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

Police Officer Lenz demonstrates ability to execute the duties outlined on the job description and demonstrates knowledge of laws, ordinances and written directives.

Comments:
Dependability
The extent to which an employee follows attendance standards, safety and conduct rules, and all CMHA regulations.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

Police Officer Lenz follows all attendance standards and Rules and Regulations as set by CMHA. Police Officer Lenz has not been tardy nor used any sick time.

Work Ethic
A set of positive values that the employee demonstrates in their work habits, including a positive attitude, punctuality, completing a task on time, and producing high quality work. Accepts constructive criticism. Exhibits proper grooming and maintains a clean personal appearance. Demonstrates proper care of assigned equipment.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

Police Officer Lenz set of positive values that the employee demonstrates in their work habits, including a positive attitude, punctuality, completing a task on time. Police Officer Lenz exhibits proper grooming and maintains a clean personal appearance.

Customer Service
Treats all customers/coworkers/supervisors with respect. Responds to needs within agreed time frames. Address conflicts and problem situations with patience and tact. Maintains positive relations with stakeholders and members of the community.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

Police Officer Lenz treats all customers/coworkers/supervisors with respect. Responds to needs within agreed time frames. Police Officer Lenz addresses conflicts and problem situations with patience.
<table>
<thead>
<tr>
<th>Quality of Work and Productivity</th>
</tr>
</thead>
<tbody>
<tr>
<td>The quality and efficiency of work completed in a specific period of time, i.e. meeting or exceeding established goals. Submits reports in an organized, legible manner using proper grammar. Work output matches the expectations established. Employee completes all assignments.</td>
</tr>
<tr>
<td>☐ Exceeds Expectations</td>
</tr>
<tr>
<td>☐ Meets Expectations</td>
</tr>
<tr>
<td>☐ Needs Improvement</td>
</tr>
<tr>
<td>Police Officer Lenz quality and efficiency of work completed in a specific period of time, i.e. meeting or exceeding established goals. Submits reports in an organized, legible manner using proper grammar.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Responsiveness to Co-Workers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participates in discussions in collaborative situations. Demonstrates consideration for co-workers by arriving on-time for appointments and work-time. Makes alternative arrangements to cover work duties and planned absences and performs extra duties when asked. Maintains positive and courteous relationships with co-workers.</td>
</tr>
<tr>
<td>☐ Exceeds Expectations</td>
</tr>
<tr>
<td>☐ Meets Expectations</td>
</tr>
<tr>
<td>☐ Needs Improvement</td>
</tr>
<tr>
<td>Police Officer Lenz demonstrates consideration for co-workers by arriving on-time for appointments and work-time. Police Officer Lenz makes alternative arrangements to cover work duties and planned absences and performs extra duties when asked.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Teamwork</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assists coworkers when there is an opportunity; gives coworkers positive feelings about working as a team; talks positive and creates a positive working environment. Ensures safety in the work environment.</td>
</tr>
<tr>
<td>☐ Exceeds Expectations</td>
</tr>
<tr>
<td>☐ Meets Expectations</td>
</tr>
<tr>
<td>☐ Needs Improvement</td>
</tr>
<tr>
<td>Police Officer Lenz assists coworkers when there is an opportunity; gives coworkers positive feelings about working as a team and talks positive about other officers.</td>
</tr>
</tbody>
</table>
Key Strengths:
Police Officer Lenz has a strong communication skill that he has used to effectively communicate with others in time of distress. Police Officer Lenz is able to keep calm and keep a level head during high stress situations.

Specific areas where improvement is needed:
Work on completing more reports and understanding the report writing system used.

Goals for the upcoming year (at least 3):
1) Work on continuing education
2) Attend Continous training for more experience
3) Work on moving up in the department

Overall Rating for the Employee:
- [ ] Exceeds Expectations
- [ ] Meets Expectations
- [ ] Needs Improvement

Employee Signature: [Signature]
Date: 22-Dec-2015

Supervisor Signature: [Signature]
Date: 22-Dec-2015

Department Director: [Signature]
Date: 12-29-2015
Cuyahoga Metropolitan Housing Authority
Employee Performance Appraisal – Self Evaluation

Instructions: Preparation for the performance review with your supervisor should begin with the employee completing a self-appraisal. The self-evaluation is designed to facilitate constructive discussion between the employee and manager in order to clarify performance objectives and provide feedback about the employee’s performance with respect to skills and behaviors.

<table>
<thead>
<tr>
<th>Key Strengths:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Believe I can communicate to anyone and able to de-escalate stressful situations well.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Specific areas where improvement is needed:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Geography, more experience in different situations, learning more of the ORC / ORD.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goals for the upcoming year (at least 3):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal goals for the upcoming year would be to receive more training (IE. anything to make me more proficient in policing)</td>
</tr>
<tr>
<td>Try out for SWAT.</td>
</tr>
<tr>
<td>Become more knowledgeable in case laws and ORC / ORD.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Additional employee comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The last seven (7) months have been a great experience, and I plan on having many more years, members of the team are always willing to help and back you up.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Overall Self Rating:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Exceeds Expectations</td>
</tr>
<tr>
<td>✗ Meets Expectations</td>
</tr>
<tr>
<td>□ Needs Improvement</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Employee Name:</th>
<th>Robert Lenz</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department:</td>
<td>CMHAPD</td>
</tr>
<tr>
<td>Supervisor Name:</td>
<td>James Neal Sergeant #668</td>
</tr>
<tr>
<td>Date:</td>
<td>22DEC15</td>
</tr>
<tr>
<td>Job Title:</td>
<td>Police Officer</td>
</tr>
</tbody>
</table>
### Attendance Point Information
- Current Attendance Points: 0
- Current Attendance Point Status: Safe

### Sick Abuse Event Information
- Current Sick Abuse Events: 0
- Current Event Status: Safe
- Abuse Points Calculated Range: N/A

### Comments
- Total Comments: 7

<table>
<thead>
<tr>
<th>Date</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/22/2015</td>
<td>Tardy Excused by 650</td>
</tr>
<tr>
<td>9/2/2015</td>
<td>Use of Force/Range Training</td>
</tr>
<tr>
<td>11/10/2015</td>
<td>In Service</td>
</tr>
<tr>
<td>11/18/2015</td>
<td>HR Training</td>
</tr>
<tr>
<td>12/6/2015</td>
<td>RDO switched due to CIT</td>
</tr>
<tr>
<td>12/7/2015</td>
<td>CIT Training</td>
</tr>
<tr>
<td>12/17/2015</td>
<td>Taser</td>
</tr>
</tbody>
</table>
Introductory Period Performance Assessment

Employee Name: Robert Lenz
Hire/Transfer Date: 5/22/2015
Position Title: police officer
Evaluation Type: ☑ 180-day

Department: Police Department
Evaluation Date:

Instructions: Performance levels and associated ratings have been established for Performance Competencies. Complete this review using the following scale:

M = Meets Expectations
U = Unsatisfactory

QUALITY OF WORK PERFORMANCE

Accuracy & timeliness: Are work products completed on time, with accuracy, without consistent supervision? ☑ M ☐ U

Adaptability: Can employee adjust to changes / handle pressure? ☑ M ☐ U

Creativity & Initiative: Does employee use creativity and take initiative in finding new ways to complete the assigned work? ☑ M ☐ U

Communication skills: Does employee effectively express himself/herself verbally (e.g. telephone), in person, and in writing? ☑ M ☐ U

Organization: Does employee maintain organized systems, files, equipment, tools, workstation, etc.? ☑ M ☐ U

RELATIONSHIPS

Attitude toward the work & organization: Does employee have a positive attitude about the job, understand our mission, and represent CMHA well? ☑ M ☐ U

Relationships with co-workers: Does employee work cooperatively with co-workers, maintain good relationships, exert a positive influence in the workplace? ☑ M ☐ U

Relationship with supervisor: Does employee accept supervision and constructive criticism? ☑ M ☐ U

Relationship with stakeholders (i.e. tenants/participants, vendors, contractors, etc.): Does employee develop good relationships with CMHA stakeholders that reflect well on CMHA? ☑ M ☐ U

DEPENDABILITY & JUDGMENT

Attendance: Does employee report to work regularly and on-time, follow CMHA procedures regarding absences, insure that responsibilities are covered? ☑ M ☐ U

Dependability & follow-through: Can employee be counted on to complete assigned responsibilities, to follow through on tasks, and to ask for clarity where it is needed (rather than allow a task to remain undone)? ☑ M ☐ U

Judgment and problem solving: Does employee show good judgment and the ability to act independently (and appropriately) when faced with a problem? ☑ M ☐ U

General Comments: Officer Lenz has a very strong grasp of our agency's goals and works very hard to promote good relationships with our community.

Employee Signature: [Signature] Date: 16 Nov 15

Supervisor Signature: [Signature] Date: 16 Nov 16

Department Head Signature: [Signature] Date: 11/17/2015
Introductory Period Performance Assessment

Employee Name: Robert Lenz
Hire/Transfer Date: 5/22/2015

Department: Police Department
Evaluation Date:

Last 4 SSN: police officer
Evaluation Type: [ ] 30-day [ ] 60-day [ ] 90-day [ ] 120-day [ ] 150-day

Instructions: Performance levels and associated ratings have been established for Performance Competencies. Complete this review using the following scale:

- M = Meets Expectations
- I = Needs Improvement
- U = Unsatisfactory

QUALITY OF WORK PERFORMANCE

Accuracy & timeliness: Are work products completed on time, with accuracy, without consistent supervision?

- M [ ] I [ ] U [ ]

Adaptable: Can employee adjust to change / handle pressure?

- M [ ] I [ ] U [ ]

Creativity & Initiative: Does employee use creativity and take initiative in finding new ways to complete the assigned work?

- M [ ] I [ ] U [ ]

Communication skills: Does employee effectively express himself/herself verbally (e.g., telephone), in person, and in writing?

- M [ ] I [ ] U [ ]

Organization: Does employee maintain organized systems, files, equipment, tools, workstation, etc.?

- M [ ] I [ ] U [ ]

RELATIONSHIPS

Attitude toward work & organization: Does employee have a positive attitude about the job, understand our mission, and represent CMHA well?

- M [ ] I [ ] U [ ]

Relationships with co-workers: Does employee work cooperatively with co-workers, maintain good relationships, exert a positive influence in the workplace?

- M [ ] I [ ] U [ ]

Relationship with supervisor: Does employee accept supervision and constructive criticism?

- M [ ] I [ ] U [ ]

Relationship with stakeholders (i.e. tenants/participants, vendors, contractors, etc.): Does employee develop good relationships with CMHA stakeholders that reflect well on CMHA?

- M [ ] I [ ] U [ ]

DEPENDABILITY & JUDGMENT

Attendance: Does employee report to work regularly and on-time, follow CMHA procedures regarding absences, ensure that responsibilities are covered?

- M [ ] I [ ] U [ ]

Dependability & follow-through: Can employee be counted on to complete assigned responsibilities, to follow through on tasks, and to ask for clarity when it is needed (rather than allow a task to remain undone)?

- M [ ] I [ ] U [ ]

Judgment and problem solving: Does employee show good judgment and the ability to act independently (and appropriately) when faced with a problem?

- M [ ] I [ ] U [ ]

General Comments: Lenz is on task with his training. He is able to initiate, organize, receive reports and complete all assignments with little assistance.

Employee Signature: [Signature] Date: 12/07/2015
Supervisor Signature: [Signature] Date: 12/07/2015
Department Head Signature: [Signature] Date: 12/07/2015
## Introductory Period Performance Assessment

**Employee Name:** Robert Lenz  
**Department:** Police Department  
**Hire/Transfer Date:** 5/22/2015  
**Last 4 SSN:**  
**Position Title:** police officer  
**Evaluation Type:** ☑ 150-day  
**Evaluation Date:**  

**Instructions:** Performance levels and associated ratings have been established for Performance Competencies. Complete this review using the following scale:

- M = Meets Expectations  
- I = Needs Improvement  
- U = Unsatisfactory

### Quality of Work Performance

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<tr>
<th>Category</th>
<th>Rating</th>
</tr>
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<tr>
<td>Accuracy &amp; timeliness: Are work products completed on time, with accuracy, without consistent supervision?</td>
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### Relationships

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### Dependability & Judgment

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<th>Category</th>
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<td>Attendance: Does employee report to work regularly and on-time, follow CMHA procedures regarding absences, ensure that responsibilities are covered?</td>
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<tr>
<td>Judgment and problem solving: Does employee show good judgment and the ability to act independently (and appropriately) when faced with a problem?</td>
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</tbody>
</table>

**General Comments:**  

Robert Lenz is on task with his training. He is capable to initiate audits, review reports and complete all assignments with little to no assistance.

**Employee Signature:**  
**Date:** 26 OCT 15 @ 0627

**Supervisor Signature:**  
**Date:** 26 OCT 15

**Department Head Signature:**  
**Date:** 10/27/2015
**Introductory Period Performance Assessment**

Employee Name: Robert Lenz  
Department: Police Department  
Hire/Transfer Date: 5/22/2015  
Evaluation Date:  
Last 4 SSN:  
Position Title: police officer  
Evaluation Type: ☑ 30-day ☐ 60-day ☐ 90-day ☑ 120-day ☐ 150-day  

*Instructions*: Performance levels and associated ratings have been established for Performance Competencies. Complete this review using the following scale:

M = Meets Expectations  I = Needs Improvement  U = Unsatisfactory

### QUALITY OF WORK PERFORMANCE

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<tr>
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### DEPENDABILITY & JUDGMENT

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</tr>
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</table>

### General Comments

Employee Signature: [Signature]  Date: 15 Sept 15  
Supervisor Signature: [Signature]  Date: 15 Sept 15  
Department Head Signature: [Signature]  Date: 9/7/2015
# Introductory Period Performance Assessment

Employee Name: Robert Lenz  
Department: Police Department  
Hire/Transfer Date: 5/22/2015  
Evaluation Date:  
Position Title: Police Officer  
Evaluation Type: [ ] 30-day [ ] 60-day [x] 90-day [ ] 120-day [ ] 150-day

**Instructions:** Performance levels and associated ratings have been established for Performance Competencies. Complete this review using the following scale:  
M = Meets Expectations  I = Needs Improvement  U = Unsatisfactory

## Quality of Work Performance

<table>
<thead>
<tr>
<th>Competency</th>
<th>Rating</th>
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<tbody>
<tr>
<td>Accuracy &amp; timeliness: Are work products completed on time, with accuracy, without consistent supervision?</td>
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## Relationships

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</table>

## Dependability & Judgment

<table>
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<tr>
<th>Responsibility</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance: Does employee report to work regularly and on-time, follow CMHA procedures regarding absences, insure that responsibilities are covered?</td>
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</tbody>
</table>

## General Comments

Employee Signature: [Signature]  
Date: 20Aug15

Supervisor Signature: [Signature]  
Date: 20Aug15

Department Head Signature: [Signature]  
Date: 8/21/2015
Introductory Period Performance Assessment

Employee Name: Robert Lenz
Hire/Transfer Date: 5/22/2015
Position Title: Police Officer
Evaluation Type: 90-day

Instructions: Performance levels and associated ratings have been established for Performance Competencies. Complete this review using the following scale:

M = Meets Expectations
I = Needs Improvement
U = Unsatisfactory

QUALITY OF WORK PERFORMANCE

Accuracy & timeliness: Are work products completed on time, with accuracy, without consistent supervision?

Adaptability: Can employee adjust to changes/handle pressure?

Creativity & initiative: Does employee use creativity and take initiative in finding new ways to complete the assigned work?

Communication skills: Does employee effectively express himself/herself verbally (e.g., telephone), in person, and in writing?

Organization: Does employee maintain organized systems, files, equipment, tools, workstations, etc.?

RELATIONSHIPS

Attitude toward the work & organization: Does employee have a positive attitude about the job, understand our mission, and represent CMHA well?

Relationships with co-workers: Does employee work cooperatively with co-workers, maintain good relationships, exert a positive influence in the workplace?

Relationship with supervisor: Does employee accept supervision and constructive criticism?

Relationship with stakeholders (i.e., tenants/participants, vendors, contractors, etc.): Does employee develop good relationships with CMHA stakeholders that reflect well on CMHA?

DEPENDABILITY & JUDGMENT

Attendance: Does employee report to work regularly and on-time, follow CMHA procedures regarding absences, insure that responsibilities are covered?

Dependability & follow-through: Can employee be counted on to complete assigned responsibilities, to follow through on tasks, and to ask for clarity where it is needed (rather than allow a task to remain undone)?

Judgment and problem solving: Does employee show good judgment and the ability to act independently (and appropriately) when faced with a problem?

General Comments

Employee Signature: [Signature]
Date: [Date]

Supervisor Signature: [Signature]
Date: [Date]

Department Head Signature: [Signature]
Date: [Date]
Introductory Period Performance Assessment

Employee Name: Robert Lenz  
Department: Police Department  
Hire/Transfer Date: 5/22/2015  
Evaluation Date:  
Position Title: police officer  
Evaluation Type: □ 30-day □ 60-day □ 90-day □ 120-day □ 150-day

Instructions: Performance levels and associated ratings have been established for Performance Competencies. Complete this review using the following scale:

M = Meets Expectations  I = Needs Improvement  U = Unsatisfactory

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General Comments:
Robert Lenz was on military leave from July 8th, 2015 through August 3rd, 2015. Cannot evaluate during this time period.

Employee Signature: [Signature]  Date: 13 Aug 15

Supervisor Signature: [Signature]  Date: 8-13-15

Department Head Signature: [Signature]  Date: 8/19/2015
## Introductory Period Performance Assessment

**Employee Name:** Robert Lenz

**Department:** Police Department

**Hire/Transfer Date:** 5/22/2015

**Evaluation Date:**

**Position Title:** police officer

**Evaluation Type:**

- [ ] 30-day
- [x] 60-day
- [ ] 90-day
- [ ] 120-day
- [ ] 150-day

**Instructions:** Performance levels and associated ratings have been established for Performance Competencies. Complete this review using the following scale:

- **M** = Meets Expectations
- **I** = Needs Improvement
- **U** = Unsatisfactory

### QUALITY OF WORK PERFORMANCE

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**General Comments:** Military Leave 7/9/15 - 8/2/15

---

**Employee Signature:** [Signature]

**Date:** 6/25/15

**Supervisor Signature:** [Signature]

**Date:** 06/03/15

**Department Head Signature:** [Signature]

**Date:** 8/10/2015
## Introductory Period Performance Assessment

**Employee Name:** Robert Lenz  
**Department:** Police Department  
**Hire/Transfer Date:** 5/22/2015  
**Evaluation Date:** 6/22/2015  
**Position Title:** police officer  
**Evaluation Type:** ☒ 30-day ☐ 60-day ☐ 90-day ☐ 120-day ☐ 150-day

**Instructions:** Performance levels and associated ratings have been established for Performance Competencies. Complete this review using the following scale:

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| Judgment and problem solving: Does employee show good judgment and the ability to act independently (and appropriately) when faced with a problem? | ☒ M ☐ I ☐ U |

### General Comments

**Employee Signature:** [Signature]  
**Date:** 22Jun15

**Supervisor Signature:** [Signature]  
**Date:** 22Jun15

**Department Head Signature:** [Signature]  
**Date:** 6/29/2015
SECONDARY EMPLOYMENT
**Request for Permission to Carry Personal Weapon**

**MEMBER INFORMATION**
- **First Name:** Rob
- **Last Name:** Leave
- **Social Security Number:** (Redacted)
- **Date of Birth:** 3/17/88
- **Badge Number:** 52
- **Type of Officer:** Sworn Police Officer

**DESCRIPTION / CHARACTERISTICS OF MY PROPOSED PERSONAL WEAPON**
- **Manufacturer:** BLACK
- **Model:** G-26
- **Caliber:** 9 mm
- **Serial Number:** VH4-U-585
- **Finish:** Black / OD Green
- **Magazine Capacity:** 10
- **Type:** Semi-Auto
- **Barrel Length:** 3.43"

**NCIC CLEARANCE**
- **Date of NCIC Check Completed:** 7/16/20
- **Checked By:** Pope
- **Weapon Clears NCIC?** YES [ ] NO [ ]
- **Reason why Weapon Does NOT clear:**

**MEMBER REQUEST**
- **I Respectfully Request Permission to Carry the Above-Described Weapon While:** OFF DUTY [ ] ON DUTY [X]

**MEMBER SIGNATURE**
- **Signature:** [Signature]
- **Date:** 15 July 2020

**RANGE OFFICER CERTIFICATION**
- **I certify that I have inspected the specified firearm and found it to be in compliance with department regulations and operationally safe. I further certify that the above-named officer has successfully completed the approved course of fire. I recommend permission be granted [ ] not granted [ ]**
- **RANGE OFFICER:** [Signature]
- **Date:** 7/16/20

**APPROVED [X] NOT APPROVED [ ] (Off Duty Carry Only)**

**CMHA CHIEF OF POLICE**
- **Signature:** [Signature]
- **Date:** 7/17/2020
TO: John Smiddy #654, Sergeant – Second Platoon
FROM: Robert Lenz #52, Patrolman - Second Platoon

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<th>PAGE</th>
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<tr>
<td>1 of 1</td>
<td>Request For Career Day</td>
<td>17JAN18</td>
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I would like to request permission to attend and conduct a presentation for Career Day at Memorial Elementary School address of 410 E 152nd St, Cleveland, OH 44110. I was asked by my mother-in-law Nancy Petro 3rd grade teacher at above mentioned school. The date is 31JAN18 from 0800-1200. Additionally would like to request hand out's (JR badges) possibly a zone car as well.

Respectfully,

Robert Lenz, Patrol Officer #52

Approved

1/24/2018

Reviewed

Though this school does not service CMHA youths, this would still be a good PR presentation for both the PD and Police. I recommend approval.

John Smiddy

1/22/18

Recommend Approval -
Good cause and sufficient reason for on this date 1/22/18

CMAPD04-001 REV 8/2015
January 10, 2018

Dear Sir or Madame:

I am contacting you to request your assistance in providing our students with an awesome educational opportunity. As a school we are committed to making our students more well-rounded by exposing them to different careers. Plans are underway to coordinate our annual Career Day. Memorial School's Career Day 2018 is scheduled for Wednesday January 31, 2018.

The purpose of this event is to motivate our students by working closely with the community to help improve their educational outcome. You are essential to the success of this day because we believe in the old saying "it takes a village". We are working to educate our students on critical issues and we need a strong voice from you to help spread the message to our students that "YES, you CAN achieve!" we would be so honored if you would accept our invitation to be a speaker for Career Day 2018.

Please plan to prepare a 15-20 minute presentation that includes time for interaction and questions and answers. I strongly encourage you to bring props, photos, or any other kind of visual aid that will provide our students with a better understanding of what you do in your career. We are planning for each class to see at least 3-4 speakers if possible. **We will have two different sessions one at 8:30am and another one at 1:00pm. Please indicate if you are available for BOTH sessions or just one session and provide the time of choice.**

We would really appreciate your personal contribution toward a successful Career Day experience at Memorial School, however, if you are unable to speak with our students, please share with me a name and contact for one of your coworkers who would be interested in attending. We look forward to having you. Please reply back to this emailing accepting this invitation and more details will be sent to you. For more questions or concerns please feel free to contact me at (216) 838-0850 or you can email me at Lacola.mosley@clevelandmetroschools.org.

Best,

Mrs. LaCola Mosley
Dean of Engagement and Student Supports
Memorial School
COMPENSATORY TIME PAYOUT REQUEST

TO: CMHA FINANCIAL SERVICES / PAYROLL DEPARTMENT

FROM: Robert A. Lenz #52

(Full Name and Badge Number of requesting member)

PAGE 1 of 1
SUBJECT: Compensatory Time Payout Request
DATE: 11 May 2017

I am requesting disbursement of my accumulated compensatory time pursuant to my collective bargaining agreement with CMHA for the time period shown below.

I understand that I may make this request only one (1) time per year. I also understand that in accordance with policy, CMHA will automatically disburse any remaining compensatory time owed to me in December of this year.

Beginning: January 01, 2017
Pay Period Ending: May 26, 2017
Current Balance: 232 / Total

Respectfully,

Signature of requesting member

Administrative Commander Review: Date: 5/12/17

FOR PAYROLL DEPARTMENT USE ONLY:

Hours paid (code 323 - Comtime Payoff P/S): __________
Pay Ending Date: ___________________________
CUYAHOGA METROPOLITAN HOUSING AUTHORITY
POLICE DEPARTMENT

COMPENSATORY TIME PAYOUT REQUEST

TO: CMHA FINANCIAL SERVICES / PAYROLL DEPARTMENT

FROM: Robert A. Lenz #52

(Pull Name and Badge Number of requesting member)

I am requesting disbursement of my accumulated compensatory time pursuant to my collective bargaining agreement with CMHA for the time period shown below.

I understand that I may make this request only one (1) time per year. I also understand that in accordance with policy, CMHA will automatically disburse any remaining compensatory time owed to me in December of this year.

Beginning: January 01, 2017
Pay Period Ending: May 26, 2017
Current Balance: 282.20

Respectfully,

Signature of requesting member

Administrative Commander Review:

FOR PAYROLL DEPARTMENT USE ONLY:

Hours paid (code 333 - CompTime Payoff/PS): __________
Pay Ending Date: __________
Sir, as of 09APR17 I am out of the Ohio Army National Guard (C Company 1-145th Infantry) in an active drilling capacity and now in Inactive Ready Reserve (IRR) which does not actively drill.

Respectfully,

Robert Lenz, Patrol Officer #52

Reviewed

4-20-17

4/20/17

CMHAP094-001 REV. 8/2015
TO: CMHA FINANCIAL SERVICES / PAYROLL DEPARTMENT

FROM: Robert A. Lenz #52
(Full Name and Badge Number of requesting member)

Compensatory Time Payout Request

I am requesting disbursement of my accumulated compensatory time pursuant to my collective bargaining agreement with CMHA for the time period shown below.

I understand that I may make this request only one (1) time per year. I also understand that in accordance with policy, CMHA will automatically disburse any remaining compensatory time owed to me in December of this year.

Beginning: January 01, 2016
Pay Period Ending: July 01, 2016
Current Balance: 250

Respectfully,

Signature of requesting member

Administrative Commander Review: ___________________________ Date: 6/14/16

FOR PAYROLL DEPARTMENT USE ONLY:
Hours paid (code 323 - Comptime Payoff P/S):__________
Pay Ending Date: ___________________________
Compensatory Time Payout Request

TO: CMHA FINANCIAL SERVICES / PAYROLL DEPARTMENT
FROM: Robert A. Lenz #52

I am requesting disbursement of my accumulated compensatory time pursuant to my collective bargaining agreement with CMHA for the time period shown below.

I understand that I may make this request only one (1) time per year. I also understand that in accordance with policy, CMHA will automatically disburse any remaining compensatory time owed to me in December of this year.

Beginning: January 01, 2016
Pay Period Ending: July 01, 2016
Current Balance 250

Respectfully,

Signature of requesting member

Administrative Commander Review:  

FOR PAYROLL DEPARTMENT USE ONLY:

Hours paid (code 353 - Comtime Payoff P/S):  
Pay Ending Date:  

Glock Model 17 Firearm Responsibility Form

I, Robert A. Lent (Print Full Name) acknowledge issuance to me of a Glock Model 17 firearm which is the property of the Cuyahoga Metropolitan Housing Authority Police Department (CMHPD). I acknowledge and understand that the firearm remains the property of CMHPD and must be surrendered upon suspension, termination, or extended illness as provided by CMHPD's rules and regulations.

I acknowledge and understand that I will be held accountable and responsible if my CMHPD issued firearm becomes unserviceable due to loss, damage, or circumstances determined to have been caused by my intentional act, misuse, or neglect. Should my intentional act, misuse, or neglect render the firearm unserviceable, I will reimburse CMHA the cost of repair and/or replacement.

I acknowledge and understand that I will safely transport and store the CMHPD issued firearm in accordance with all applicable laws and ordinances.

I acknowledge and understand that I am not authorized to carry my CMHPD issued Glock Model 17 firearm while engaged in any secondary employment.

I acknowledge and understand that misuse or neglect of a CMHPD issued weapon shall be the subject of an investigation and may be the basis for disciplinary action, up to and including termination from employment, consistent with CMHPD regulations and the Personnel Policies and Procedures Manual of the Cuyahoga Metropolitan Housing Authority.

Issued Glock Model 17 Serial #: 847 8 73

Member Signature: [Signature] Date Issued: 10/4/96 8 PM

Issued by: [Signature] Date Issued: 10/4/96
LETTER OF COMMENDATION

April 4, 2016

Robert Lenz, Police Officer

Dear Officer Lenz:

I was recently informed by Lieutenant Carol Rucker of a significant arrest you made on Thursday, March 24, 2016. You along with other officers responded to a call for males with weapons. Upon arriving, you observed a group of males behaving in a suspicious manner walking away from the location. You engaged the males and noticed that they were breathing heavily and nervous.

The investigation led you to inspect the area where you observed the males. Upon inspection, you, with the assistance of other officers, discovered a loaded 9mm firearm that was placed by the left front tire of a parked vehicle. Another loaded .40 caliber firearm was also discovered lying in the grass where the males were seen standing. Overall, you and the other officers were successful in removing two (2) loaded firearms from the street. You were also successful in recovering cash and a large quantity of drugs which included crack-cocaine, marijuana and PCP.

On behalf of the entire Command Staff of the CMHA Police Department, I want to thank you for a job well done. Your action and performance during this incident is indicative of the high caliber of members that serve on our department.

Sincerely,

Andrés González, Chief
CMHA Police Department

Cc: Jeffery K. Patterson, CEO
Angel Morales, Deputy Chief
William Likes, Commander

TENACITY * RESPECT * UNDERSTANDING * SERVICE * TRAINING

Jeffery K. Patterson, Chief Executive Officer/Safety Director

CMHA provides reasonable accommodations to persons with disabilities. If you need an accommodation, including auxiliary aids and services, please contact CMHA's Section 504/ADA Coordinator at 216-348-3000 (voice) or 1-866-750-0750 (Ohio Relay Service).
TO: William Likes, Commander
FROM: John Smiddy, Sergeant of Community Policing and Canine Units

Final Evaluation – Probationary Officer Robert Lenz #52

On Tuesday, November 17, 2015, I rode alongside PO Robert Lenz for an evaluation of his progress with the field training program.

Our tour began with an accurately completed vehicle inspection and calling in service with RCC. We toured various properties on both the east and west sides of town. His knowledge of the geography of CMHA properties is very impressive. He’s very aware of the layout of the city and was proficient in not only taking me to random locations I would challenge him with but could explain various routes to get to others.

PO Lenz is very professional and I was genuinely impressed to see that he surprised dozens of unsuspecting residents with a very friendly “hello” as he greets them on the street, at traffic lights and in parking lots. He has made it clear that he enjoys his work and likes working for the department. He has a strong eye for suspicious and criminal activity and will have no problems engaging in proactive police work.

I was able to monitor him on multiple calls for service and have witnessed his professionalism first hand. He asks excellent questions during his interviews and treats both victims and suspects decently.

His peers enjoy working with him and our residents are going to love him. He is confident that he is ready to serve without a trainer and he is eager to work as a solo responder.

I recommend that PO Robert Lenz #52 be removed from field training and be permitted to tour as an independent, solo responder.

Respectfully,
John Smiddy #684, Sergeant

[Handwritten note:]

Robert Lenz #52 is
removed from the field training
program. He will be assigned
to 1st Platform effective 11.25.15
in vacation class "J".

CMHAPD94-001EFF 01JAN03 Rev.26FEB03.
TRAINING
FILE
This is to certify that

Robert Lenz

has completed the Ohio Attorney General's online training course on

2017 Legal Update: Search and Seizure Law

Completed on: 10/22/2017 11:34:34 PM
This is to certify that

Robert Lenz

has completed the Ohio Attorney General's online training course on

2017 Legal Update: Civil Liability for

Officers

Completed on: 11/16/2017 4:03:05 PM
CERTIFICATE OF COMPLETION

Officer Robert Lee
CMHA PD

"IFAK Familiarization & Critical Injury First Aid" 5/30/17

This certificate is awarded to Officer Robert Lee for satisfactory completion of the "IFAK Familiarization & Critical Injury First Aid" course.

Date 11/11/2017

SAC Stephen D. Anthony - Special Agent in Charge

Principal Tactical Medical Instructor

Kerry F. McCarty

Date 11/11/2017
Ohio Peace Officer Training Commission

&

The Office of the Attorney General

This is to certify that

Robert Lenz

has successfully completed the advanced training course

53-049-17-02: Street Drugs: Recognition And Identification

at the Ohio Peace Officer Training Academy given

September 08, 2017

Mike DeWine
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Mary E. Davis, Executive Director
Ohio Peace Officer Training Commission
DATE CERTIFICATE PRINTED: September 24, 2017
This is to certify that

Robert Lenz

has successfully completed the advanced training course

05-485-17-01: Field Training Officer (FTO) Program (Ohio Model)
at the Ohio Peace Officer Training Academy given

September 26 - 28, 2017

Mike DeWine
Attorney General
Ohio Peace Officer Training Commission

The Office of the Attorney General

This is to certify that

Robert Lenz

has successfully completed the advanced training course

03-687-17-03: Testifying in Court Boot Camp

at the Ohio Peace Officer Training Academy given

September 20 - 21, 2017

Mike DeWine
Attorney General

Mary E. Davis, Executive Director
Ohio Peace Officer Training Commission

DATE CERTIFICATE PRINTED: October 2, 2017
This is to certify that Robert Lenz has successfully completed the advanced training course 55-439.17-01: Survival Spanish at the Ohio Peace Officer Training Academy given October 16 - 17, 2017.

Mike DeWine
Attorney General
This is to certify that

Robert Lenz #52

Has Successfully Completed a Course of Training in
Ethics/Bias Based Policing
All Hazard Plan, Responding to Critical Incidents,
Responding to an Active Shooter

April 5th and 8th

Andrés González
Chief of Police

Sgt John Smiddy #654
This is to certify that

Robert Lenz #52

Has Successfully Completed CMHA PD In-Service Training on:

Procedural Justice/Police Legitimacy
Trauma Informed Policing/PAR

April 4-5, 2017

Andrés González
Chief of Police

Sgt. Jacqueline Burgos
BAS24081
This is to certify that

Robert Lenz #52

Has Successfully Completed a Course of Training in
Practical Application of Force/Firearms Qualification

April 4th, 2017

Date

Andrés González
Chief of Police

Sgt James Neal
BAS23769
This certificate indicates that the above-named individual (the "Student") has completed the training required and has passed a written examination in the use of the Taser X26/26P Conducted Electrical Weapon. By accepting this User Certificate, the Student accepts the terms of the Training Materials License Agreement, incorporated herein by reference, and agrees to be bound by its terms as a Licensee of Taser International, Inc. This certification must be renewed annually.

Instructor: 

Date: 04/07/2017

Robert Lenz #52
This is to certify that

Robert A. Lenz

has participated in the advanced training course

53-400-16-02: Patrol Drug Operations

at the Ohio Peace Officer Training Academy given

September 7 - 8, 2016

Mike DeWine
Attorney General

Mary E. Davis, Executive Director
Ohio Peace Officer Training Commission
This is to certify that

Robert A. Lenz

has participated in the advanced training course

03-724-16-02: Patrol Drug Operations - Practical

at the Ohio Peace Officer Training Academy given

September 28, 2016

Mike DeWine
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Mary E. Davis, Executive Director
Ohio Peace Officer Training Commission
This is to certify that Robert A. Lenz has participated in the advanced training course 03-724-16-02: Patrol Drug Operations - Practical at the Ohio Peace Officer Training Academy given September 28, 2016.

Mike DeWine
Attorney General
This is to certify that

Robert A. Lenz

has participated in the advanced training course

53-400-16-02: Patrol Drug Operations

at the Ohio Peace Officer Training Academy given

September 7 - 8, 2016

Mike DeWine
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Mary E. Davis, Executive Director
Ohio Peace Officer Training Commission
This is to certify that

Robert Lenz

has successfully completed a Course of Training in

CALEA

10/9/2015

DATE OF COMPLETION

Andrés González
CHIEF OF POLICE
CUYAHOGA METROPOLITAN HOUSING AUTHORITY

Police Department

Certificate of Completion

This is to certify that

Robert Lenz

has successfully completed a Course of Training in

Hazardous Materials

9/21/2015
DATE OF COMPLETION

CMHA

Andres Gonzalez
CHIEF OF POLICE
Certificate of Accomplishment

Awarded to

Robert Lenz

In recognition for successful completion of the Community Crisis Intervention Team Training Program on this 11th day of December, 2015

William M. Denihan
Chief Executive Officer
ADAMHS Board of Cuyahoga County
DISCIPLINARY FILE
CUYAHOGA METROPOLITAN HOUSING AUTHORITY
INTEROFFICE MEMORANDUM

TO: Robert Lenz, Police Officer
FROM: Andrés González, Chief of Police
DATE: May 18, 2019
SUBJECT: COUNSELING / REINSTRUCTION

BACKGROUND

On Friday, February 22, 2019, at approximately 1833 hours, you were present and observed a use of less than lethal force (ULLF) incident involving (former) Officer Wali Shakir. Sergeant Drew responded to investigate the circumstances surrounding the incident.

ISSUE

While reviewing the investigation, I became aware of an unnecessary delay and a lack of candor from all members on scene in reporting the ULLF to a supervisor. When asked about the use of force, no one, including you, provided an immediate response which caused the supervisor to repeat the question.

You did not immediately inform your supervisor about the facts surrounding the incident which hindered his ability to effectively manage the situation. Your delay in informing the supervisor creates an impression of doubt regarding your integrity that negatively impacts our goal to be viewed as a transparent organization.

COUNSELING

Lack of immediate disclosure or silence creates ambiguity that is not consistent with our Core Values. Delayed reporting and silence, especially after being directly asked a question, reflects negatively on you and on our Department.

Please be mindful that you have an ethical responsibility to immediately report a use of force incident that you have witnessed or that you may be involved in. You have a responsibility to immediately be forthcoming and inform a supervisor of the events surrounding a use of force incident.

AG

I understand this counseling and reinstruction.

PO Robert Lenz

18 MAY 2055 HRS
Date
Officer Robert Lenz Interview

On May 2, 2019, Officer Robert Lenz was interviewed as part of an internal investigation regarding CMHA Police Policies and Procedures and Rules and Regulations applicable to the handling of a Use of Less than Lethal Force incident that occurred on February 22, 2019 involving Ms. Rose Elder at 1795 W. 25th St. in CMHA’s Riverview high-rise property.

Before beginning the interview, Officer Lenz acknowledged receipt of the Notice of Investigation issued to him by Chief Andres Gonzalez. He was also given and signed a Garrity Warning. Prior to this meeting, Officer Lenz has met with and has been interviewed by Lieutenant Gregory Drew as part of Lieutenant Drew’s investigation into the Use of Less than Lethal Force and citizen’s complaint made by Ms. Elder stemming from the February 22, 2019 incident above.

The interview with Officer Lenz began by asking him the circumstances surrounding his response to Riverview high-rise at 1795 W. 25th St. He was the first officer to respond and believes he was coming from the Rocky River/Puritas area. He stated that whenever a protection officer asks for help, police officers respond. This specific call for help came from a west-side building and he patrols the west-side. He does remember that he was the first officer to arrive, and because of that he was the primary officer. He explained that typically, the first officer to respond and/or have contact with parties on scene is the officer who is going to handle the report, including writing the report. However, Officer Lenz indicated that because he did not have any direct involvement in the use of force, that he would not be writing this report. It is his understanding that generally once a supervisor arrives on scene, they are in charge.

Officer Lenz is CIT trained, but he does not know if any of the other officers who responded were CIT trained. He explained that CIT trained officers wear pins, but his is broken so he was not wearing it on February 22, 2019. Officer Lenz recalled that he walked past a man who turned out to be Mr. James Smiley on his way to go talk to Protection Officer Kamoru Ramoni to learn what was happening. Officer Lenz had a hard time understanding over radio what was happening. He did recall everything happening so fast that he did not have a chance to have a conversation with the other responding officers in order for him to delegate and assign duties and responsibilities. He recalled Sergeant Drew arriving on scene and immediately going to talk to Officer Ramoni. He knows that someone asked for EMS for Ms. Elder, but he could not remember who.

Officer Lenz was then asked questions about any and all conversations on scene about force being used. Officer Lenz believes that once Ms. Elder was in the ambulance, all of the officers went outside to speak with Sergeant Drew because he wanted to be de-briefed about what occurred. Officer Lenz could not recall if Officer Ramoni was part of this de-briefing, and he was also unable to remember the context of the conversation had. He does remember that Officer Wali Shakir talked about using force. He could not remember what specifically was asked in the de-briefing, but believes Sergeant Drew in some form asked generally about what happened. He could not recall how many times Sergeant Drew asked questions.

Next, Officer Lenz was asked about his understanding regarding reporting use of force. He expects that whoever is the officer who uses force is the officer who should report it and it is his understanding that the use of force needs to be reported and a supervisor is to be immediately contacted. In his experience, it is common practice for whoever exerts the force, to report the force. Officer Lenz was unsure if the use of force needs to be reported over radio, but it usually does get reported over radio when officers ask for a supervisor to respond if force has been used.
Officer Lenz is unsure if anyone tried to talk to Sergeant Drew about force being used prior to his de-briefing outside.

Officer Lenz did not know if use of force was called out over radio, but he thinks this is because Sergeant Drew had already responded to the scene. He does remember Sergeant Drew arriving and immediately conferring with Protection Officer Ramoni in his security booth. When asked if he recalls anything else, Officer Lenz indicated that he believes officers would have called EMS regardless, but knows someone called for EMS due to Ms. Elder complaining of high blood pressure. He cautioned that he does not remember the exact order of everything that happened that evening because so much time has passed and everything occurred so quickly.
TO: Robert Lenz #52 Police Officer

FROM: Angel J. Morales, Deputy Chief

DATE OF INCIDENT: 28NOV17

INVESTIGATION WRITTEN WARNING

CLASSIFICATION:

SANCTION/S: N/A

MISCELLANEOUS: Member to receive a written warning regarding conduct unbecoming use of profanity while on duty in uniform

Angel J. Morales, Deputy Chief

I acknowledge receipt of this "Investigation Determination" and understand its content.

Signature: [Signature]
Date: 8 JAN 18
Time: 19:29 HRS

Issuing/Witnessing Supervisor:

SUPERVISOR: after execution, return this form immediately through Official Channels.
TO: Robert Lenz #52, Police Officer-2nd Platoon

FROM: Carol D. Rucker #632, Acting Patrol Commander

DISCIPLINE
WRITTEN WARNING re: Conduct Unbecoming

On Friday, 24NOV17, you violated portions of the CMHAPD Policy and Procedures, and/or the CMHAPD Manual of Rules and Regulations, and/or the CMHA Administrative Order 11.

Specifically, you are alleged to have violated:

Rules and Regulations –III-F: Conduct Unbecoming an Employee
Rules and Regulations –VI-A (11),(12) and (17): Prohibited Conduct
Rules and Regulations – Chapter 2.1 Core Values III-A (1)(2)(3)
Rules and Regulations—IV-J Code of Ethics
Personal Policy and Procedures
B-I-B-8: Violation of CMHA Rules, Regulation, Policies and Procedures
B-I-B-13
B-I-B-14
B-I-B-16..In pertinent part disrespectful conduct
B-I-B-23.. In pertinent part discourtesy to co-worker
B-I-B-32.. Conduct Unbecoming of an employee in public service
C2)-(A)(i) Major Infraction .. In pertinent part of any violation of an order or any CMHA rule of conduct or CMHA policy that would disrupt the good order of the department.
CMHAPD Rules and Regulations:
I. Purpose
II. (R) Failure to Obey Orders Given by Property Authority
III. -H Violation of Established Departmental Written Directives
V.A(7) Give Immediate Obedience to all Lawful Orders of a Supervisor
V.A2-(13) Cooperate with one another in the Performance of Police Duties
V.A2-(32) Accord Respect to a Supervisor at all times.

On Friday, 24NOV17, while on duty and in uniform you engaged in conversation with another member in roll call room, where you began using profanity. The language was offensive and unprofessional. Your conduct is unacceptable and will not be tolerated by you or any member of the CMHA Police Department. You shall remain respectful and courteous at all times. This in turn gains the respect from residents, peers, supervisors and others you come in contact with.

APPROVED: CR Date: 1/18

CMHAPD94-859A rev. 05MAY05; rev. 18APR06
The CMHA Police Department is a nationally accredited agency as a result of demonstrating professional excellence through a national law enforcement credentialing program by the Commission on Accreditation for Law Enforcement Agencies. Accreditation is a coveted award that symbolizes professionalism, excellence, and competence. The accreditation award proves that the agency is committed to maintaining compliance with a broad-based set of internationally accepted professional standards that provide a proven management system of written directives, sound training, clearly defined lines of authority and routine reports that support decision making and resource allocation for the agency.

Since the CMHA Police Department has been accredited by CALEA, it is in the national spotlight. Therefore, there is a broad and diverse audience scrutinizing the actions of its members. Members who demonstrate voluntary compliance with Rules, Regulations, Policies and Procedures of the Department, receive the prestige as positive role models and negate the need for discipline. Positive role models have influence to foster an atmosphere of high morale and respect from their peers and/or subordinates. High morale and mutual respect for each of the members are sensed by others, both in and outside of the police community. To this end, whether the incident was an oversight or a departure from good judgment, the Department is confident you can make the necessary adjustments to prevent a reoccurrence of incidents of this type. Any further violations of this nature will result in additional discipline being taken against you. This “WRITTEN WARNING” will remain in your personnel file.

By order of,

Carol D. Rucker #632-Acting Patrol Commander

I acknowledge receipt of this "DISCIPLINARY ACTION" and understand its content.

Signature: [Signature]
(Your signature is not an admission of agreement)

8 Jan 18 / 09 32 HRS
(Date/Time)

Signature: [Signature]
(Union Representative)

16 Jan 18 / 08 37
(Date/Time)

Signature: [Signature]
(Isuing/Witnessing Supervisor)

8 Jan 18 / 08 35 HRS
(Date/Time)

APPROVED: [Signature]
Date: 16/18

CMHPD94-059A rev. 05MAY05; rev. 18APR06
TO: Robert Lenz #52 Police Officer

FROM: Andrés González, Chief

DATE: 09NOV17

DATE OF INCIDENT: 19OCT17

INVESTIGATION: VERBAL COUNSELING/ REMEDIAL TRAINING REGARDING UNPROFESSIONAL COMMENTS IN THE WORKPLACE

CLASSIFICATION:

SANCTION/S: N/A

MISCELLANEOUS: Member to receive Documented Verbal Counseling and Remedial Training Regarding Prohibited Conduct

Andrés González, Chief

I acknowledge receipt of this "Investigation Determination" and understand its content.

Signature: __________________________ Date: 15NOV17 Time: 23:27

(Your signature is not an admission of agreement)

Issuing/Witnessing Supervisor: __________________________

SUPERVISOR: after execution, return this form immediately through Official Channels.
TO: Carol Rucker #632, Lieutenant  
FROM: Kyle White #650, Sergeant

On Thursday, October 19, 2017, I gave PO Lenz a verbal counseling for an inappropriate comment that he made. While in the roll call room, myself and PO Lenz were having a conversation. During the conversation PO Lenz made an inappropriate comment which was heard by Lt. Carol Rucker #632. I then advised PO Lenz that he needs to watch what he says while at work because there may be other people around that may be offended by what was said.

Respectfully,

Sgt. Kyle A. White #650
On Thursday, November 23, 2017, I was assigned to Second Platoon as Lieutenant. I administered Documented Remedial Training on CMHAPD Rules and Regulations Sections II (F) Conduct Unbecoming an Employee and VI: Prohibited Conduct (11)(12)(17) to Police Officer Robert Lenz #52 in accordance with the determination of departmental charges for investigation X17-165. The following are the facts related to how the remedial training was administered.

At 1810 hours, I called Police Officer Robert Lenz #52 into the Lieutenant’s Office.

While in the Lieutenant’s Office I read PO Lenz the Determination of Investigation X17-165 dated November 9, 2017, from Chief Andres Gonzalez. I advised PO Lenz that as a result of the incident that occurred on October 19, 2017, he would be receiving documented remedial training on CMHAPD Rules and Regulations Sections II (F) Conduct Unbecoming an Employee and VI: Prohibited Conduct (11)-(12)-(17).

I began the documented remedial training by reading PO Lenz the entire Rules and Regulations Sections II (F) Conduct Unbecoming an Employee VI: (11)(12)(17). Upon completion, I emphasized II (F). I advised PO Lenz that no member shall use inappropriate and/or offensive language at any time while at headquarters regardless if you’re on/off duty. I proceeded to stress the importance of being professional and maintaining such when communicating with others as to not allow any language to be deemed offensive to others.
I recommended that PO Lenz review the Rules and Regulations so that he is familiar with the contents of them and ensure that he will abide by such rules and regulations. And that if he has any questions he should ask his immediate supervisor for further guidance.

PO Lenz advised that he understood and agreed with this recommendation and the remedial training that he just received.

At 1823, hours, I concluded the documented remedial training. PO Lenz previously signed the Determination of Investigation X17-165 dated November 9, 2017, from Chief Andres Gonzalez.

Respectfully,

[Signature]

Signature of Member
CERTIFICATIONS
Ohio Peace Officer Training Commission

&

The Office of the Attorney General

This is to certify that

Robert A. Lenz

has completed the Ohio Peace Officer Basic Training Program

Conducted by

Hocking College

Awarded on

May 21, 2015

Mike DeWine
Attorney General

Vernon P. Stanforth, Chairman
Ohio Peace Officer Training Commission

Mary E. Davis, Executive Director
Ohio Peace Officer Training Commission

School Commander

BAS14-003 150609
June 23, 2014

Robert A. Lenz
918 Carriage Hill Dr.
Athens OH 45701

Re: Hocking College #BAS 14-003
Date of Completion: 6/19/2014

Dear Mr. Lenz:

This letter is to verify that you have successfully completed peace officer basic training requirements and the peace officer certification examination. The date of completion of your basic academy is the date you passed the peace officer basic training examination.

If within one year of the date of completion you are appointed as a peace officer, a certificate of completion will be awarded provided no additional training requirements have been mandated by the legislature. If you receive an appointment more than one year but less than two years after the date of completion, you will be required to complete an OPOTC-approved refresher course and exam and any training requirements mandated by the legislature. If you receive an appointment more than two years after the date of completion, you must repeat the entire peace officer basic training course. In all cases, you may not perform the functions of a peace officer until you have been awarded a certificate of completion.

To obtain your peace officer basic training certificate, a notice of appointment must be submitted to this office by your first appointing agency. If the agency does not have this form, it is available from our office and website. Incomplete or improper appointment documents will not be processed and will be returned for correction.

If you or your prospective employer have further questions, please contact us at the number listed below for the London campus.

Sincerely,

Brittany Thompson
Certification Officer

cc: Michael Taylor, School Commander
    School File

BT/sis
NOTICE OF PEACE OFFICER APPOINTMENT

1. Within ten days of the appointment or status change, submit one copy of this form either by email, fax or mail.
2. Type or print legibly and complete all blanks. Enter N/A if not applicable.
3. Submit pages 1 and 2 when an officer is newly-appointed to your agency, or has previously left the agency and returns.
4. Submit only page 1 when an officer continues to be appointed by your agency, but has a change from one status, as listed in Box 15, to a different status.
5. Enter any necessary information for a Correction to Record, submitting all affected pages, and attach a letter explaining the requested change.

<table>
<thead>
<tr>
<th>OFFICER INFORMATION</th>
<th>1. Name (Last)</th>
<th>LEW</th>
<th>2. Social Security Number</th>
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<tr>
<td></td>
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<td></td>
<td>(Middle)</td>
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| 3. Alias (Last) | (First) | | (Middle) |

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<tr>
<th>4. Birth date (mm/dd/yyyy)</th>
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<th>5. Email Address</th>
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<th>6. Phone Number</th>
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<th>7. Home Mailing Address (#/Street/PO Box)</th>
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<tr>
<th>8. Basic Training Academy</th>
<th>(Only complete if this is the officer's first appointment or OSP)</th>
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<tr>
<td>HOUSING CAMP</td>
<td>14-003</td>
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<tr>
<th>AGENCY INFORMATION</th>
<th>9. Agency Name</th>
<th>CUYAHOUA METROPOLITAN HOUSING AUTHORITY</th>
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<th>10. Agency Email Address</th>
<th>cmha.po.org</th>
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<th>11. Agency Phone Number</th>
<th>216 426 7760</th>
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<th>12. Agency Mailing Address (#/Street/PO Box)</th>
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<td>5715 WOODLAND AVE.</td>
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<th>APPOINTMENT INFORMATION</th>
<th>13. New Appointment Date</th>
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<th>14. Status Change Date</th>
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<th>15. Select New Status</th>
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<th>Auxiliary</th>
<th>Reserve</th>
<th>Special</th>
<th>Seasonal</th>
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<tr>
<th>ATTESTATION OF REPORTING AUTHORITY</th>
<th>I attest that the information provided on this form is true and correct and is based on my personal knowledge or inquiry.</th>
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<tbody>
<tr>
<td>17. Signature of Reporting Authority</td>
<td></td>
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<tr>
<td>18. Name and Title</td>
<td>Chief of Police</td>
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<tr>
<td>19. Date</td>
<td>5/21/2015</td>
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<tr>
<th>NOTARY</th>
<th>Sworn to and subscribed before me this 27th day of May, 2015 in the State of Ohio. My commission expires 3-2-2023</th>
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<td>Signature of Notary</td>
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This form may be emailed to: SF400@ohioattorneygeneral.gov
20. OATH OF OFFICE

I do solemnly swear or affirm that I will support the Constitution and Laws of the United States of America, the Constitution and Laws of the State of Ohio, and Laws and Ordinances of the political subdivision to which I am appointed and to the best of my ability will discharge the duties of this office.

[Signatures]

Name of Appointing Authority (Typed or Printed Legibly)

Title of Appointing Authority (Typed or Printed Legibly)

---

OHIO PEACE OFFICER APPOINTMENT HISTORY

Please list all prior appointments. Use additional copies of page 2, as needed, to list the entire appointment history.

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<th>21. Appointed By (Agency Name and County):</th>
<th>22. From (mm/dd/yyyy):</th>
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</tr>
</tbody>
</table>
OATH OF OFFICE

I, Robert Lenz, do solemnly swear that I will support the Constitution and Laws of the United States of America, the Constitution and Laws of the State of Ohio, the Laws and Ordinances of those municipalities of which I hold concurrent jurisdiction and obey the Rules and Regulations of the Cuyahoga Metropolitan Housing Authority created under Ohio Revised Code 3735. I will discharge the duties of my office to the best of my knowledge and ability, so help me God.

[Signature]
Chief of Police

Sworn to and subscribed before me this 26th day of May, 2015, in the county of Cuyahoga and the state of Ohio.

[Signature]
Notary Public
State of Ohio, County of Cuyahoga

My Commission expires 5-25-2020

(SEAL)
AUTHORITY TO RELEASE INFORMATION,
RELEASE OF LIABILITY AND VERIFICATION

We appreciate your interest in employment with the City of Beachwood (the "City"). As part of our normal procedure for processing applications of candidates to whom conditional offers of employment have been made, a routine inquiry into your background may be made. This inquiry typically concerns information relating to character, general reputation, personal characteristics, and medical history. In addition, as part of the post-offer medical examination process, you may be tested for drug use. Further information on the nature and scope of such an inquiry, if one is made, is available to you upon written request.

Any adverse information obtained by the City in conducting its background check will be considered in the decision whether or not to hire you and may be the basis for refusal to hire you.

Please read the following authorization, request to release information statement, verification and proof of identity. Indicate your agreement by signing below.

1) Authority to Release Information.

To Whom It May Concern:

I hereby authorize the City or any authorized representative of the City bearing this release, or copy thereof, within one year of its date, to obtain any information in my files pertaining to my employment, military, credit, law enforcement, medical or educational records including, but not limited to, academic achievement, attendance, personal history, disciplinary records, physical examinations and drug tests. Such information may also include, but is not limited to, records of any law enforcement agency, State of Ohio Bureau of Criminal Investigation, the Federal Bureau of Investigation, the Bureau of Motor Vehicles or the Bureau of Workers’ Compensation. I hereby direct you to release such information upon request of the bearer. This release is executed with the full knowledge and understanding that the information will be used in connection with the consideration of my employment by the City. I hereby release you, as the custodian of such records, and any school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau, law enforcement agency, lending institution, consumer reporting agency, or retail business establishment including its present and future officers, employees, agents or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any questions as to the validity of this release, you may contact me as indicated below.

2) Release of Liability/Acknowledgment. In addition to and in conjunction with any execution of the authorization and request to release information statement set forth above, I agree to release the City and its present and future officers, employees, agents and representatives from any and all claims, demands, rights, causes of action, damages or costs, of whatever nature that I, or my heirs or legal representatives, may assert or bring in conjunction with and arising from the inquiries and examinations, including drug testing, made by the City and/or the use of any information released to the City in connection with considering me for employment.
3) **False, Misleading or Omitted Information.** I certify that all of the information contained in my employment application is true and complete. I understand that the misrepresentation or omission of any fact is sufficient cause for refusal of employment, or dismissal from my employment if I obtain a position with the City. Such dismissal may result regardless of when the City discovers the misrepresentation or omission.

I acknowledge that I have read this document in its entirety and understand the statements set forth herein.

**Full Name:**

(SIGNATURE)

3 Jan 2020

(DATE)

**Full Name:**

(Print or Type)

**Current Address:**

(NO STATION) (CITY) (STATE) (ZIP)

**Social Security Number:**

(Date of Birth: 03/17/1988)

**Telephone:**

###

STATE OF OHIO

LORAIN COUNTY

SWORN TO AND SUBSCRIBED IN MY PRESENCE THIS 20th DAY OF January

2020.

NOTARY PUBLIC
October 6, 2020

To Whom It May Concern,

The Beachwood Police Department is conducting a background investigation for the Lateral Transfer position of Police Officer. The candidate(s) has stated that they are currently employed by your Police Department. As part of the background investigation, the Beachwood Police Department is requesting the following:

- a copy of their complete Personnel File
- any and all disciplinary records
- any and all prior or current Internal Affairs Investigation documents
- any and all expunged personnel file records (if applicable)
- any and all information pertaining to any Civil Lawsuits filed against the employee
- any and all PEWS (Personnel Early Warning System) records

I have included a signed Applicant Release Form in order for us to obtain the above requested documents.

Feel free to contact me directly if you have any questions.

Thank you for your assistance,

[Signature]

Luke Combs
Beachwood Police Department
2700 Richmond Rd
Beachwood, OH 44122
Luke.Combs@beachwoodohio.com
216-292-1951
Discipline Policy
Administrative Order 11, Article B-I

The following are examples of misconduct, and are not meant to be exhaustive. Depending on the seriousness of the behavior, disciplinary action may range from reprimands to discharge.

1. Giving false or misleading employment information on initial or promotional employment application;
2. Incompetency or inefficiency in the performance of duties;
3. Poor treatment of CMHA residents;
4. Loss of certification or license required to perform the job;
5. Theft, improper removal, misappropriation, willful destruction of CMHA property or carelessness or negligence with CMHA funds or other property;
6. Falsification of timekeeping records;
7. Acts of dishonesty toward CMHA;
8. Violation of CMHA rules, regulations policies and procedures;
9. Working under the influence of alcohol or illegal drugs;
10. Possession, distribution, sale, transfer, or use of alcohol or illegal drugs in the workplace, while on duty, while operating employer-owned vehicles or equipment, or on CMHA property;
11. Accepting from any person or organization, gifts or other valuable items or service in connection with a position at CMHA;
12. Fighting or threatening violence in the workplace or on CMHA property;
13. Using profane or obscene language in the workplace or on CMHA property;
14. Boisterous or disruptive activity in the workplace or on CMHA property;
15. Negligent or improper conduct leading to damage of employer-owned or customer-owned property;
16. Insubordination or other disrespectful conduct;
17. Unauthorized use of telephones, mail system, Internet, e-mail or other employer-owned equipment;
18. Violation of health or safety rules;
19. Sleeping while on duty;
20. Smoking in prohibited areas;
21. Sexual or other unlawful harassment, or failure to report sexual or other harassment;
22. Job abandonment;
23. Discourtesy to customers, residents, and/or co-workers;
24. Excessive absenteeism and/or tardiness;
25. Failure to report personal injury or accidents immediately;
26. Performing personal business while on duty;
27. Possession of dangerous or unauthorized materials, such as explosives or firearms in the workplace;
28. Unauthorized absence from work station during the work day;
29. Unauthorized disclosure of confidential information;
30. Absence from work without leave (AWOL);
31. Any other act of malfeasance, misfeasance or nonfeasance;
32. Conduct unbecoming of an employee in public service.

I understand that I have the responsibility to read and abide by the complete Discipline Policy contained in Article B-I of the Administrative Order 11.

[Signature]
Employee Signature

[Date]

Employee Name (Please Print)

Personnel Officer
<table>
<thead>
<tr>
<th>TIME/DATE</th>
<th>ORIENTATION</th>
<th>PRESENTER INSTRUCTOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuesday</td>
<td>Uniform Fitting</td>
<td>Sgt Troyer #664</td>
</tr>
<tr>
<td>MAY 26, 2015</td>
<td>Ballistic Vest Fitting (0900)</td>
<td></td>
</tr>
<tr>
<td>0800-1000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuesday 26 2015</td>
<td>Police Assisted Referral (PAR)</td>
<td>Dr. Mark Singer</td>
</tr>
<tr>
<td>0830-1230</td>
<td>Lunch</td>
<td>Dr. Daniel Flannery</td>
</tr>
<tr>
<td>1230-1330</td>
<td>Crisis Intervention/Stress Management</td>
<td>Eileen Zatta</td>
</tr>
<tr>
<td>1330-1600</td>
<td>Front Line Services Presentation</td>
<td></td>
</tr>
<tr>
<td>Wednesday</td>
<td>Secondary Employment</td>
<td>PO Beichler #54</td>
</tr>
<tr>
<td>MAY 27, 2015</td>
<td>Rules and Regulations</td>
<td></td>
</tr>
<tr>
<td>0800-1000</td>
<td>Procedures/Training Bulletins/Form I</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sick Abuse Policy</td>
<td></td>
</tr>
<tr>
<td>1000-1100</td>
<td>Computer Orientation/Passwords</td>
<td>Masterson</td>
</tr>
<tr>
<td>1100-1200</td>
<td>Prohibited Conduct, Discipline, Complaint Investigations</td>
<td>Sgt Styles</td>
</tr>
<tr>
<td>1200-1300</td>
<td>Lunch</td>
<td>LT Homerick</td>
</tr>
<tr>
<td>1300-1400</td>
<td>SWAT</td>
<td></td>
</tr>
<tr>
<td>1400-1530</td>
<td>LEADS Certification, OHLEG</td>
<td>Beichler/Ms Kelly</td>
</tr>
<tr>
<td>1530-1600</td>
<td>Authority and Power, Mutual Aid</td>
<td>Cmdr Likes</td>
</tr>
<tr>
<td>Thursday</td>
<td>Detective Bureau/Administration</td>
<td>Sgt Troyer</td>
</tr>
<tr>
<td>MAY 28, 2015</td>
<td>Justice Center CT Room 18A</td>
<td>Judge Synenberg</td>
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<tr>
<td>0800-0930</td>
<td>Lunch</td>
<td>Sgt Harris</td>
</tr>
<tr>
<td>1000-1300</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1300-1400</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1400-1600</td>
<td>Crime Suppression/Task Force</td>
<td></td>
</tr>
<tr>
<td>Day</td>
<td>Date</td>
<td>Time</td>
</tr>
<tr>
<td>----------</td>
<td>---------------</td>
<td>------------</td>
</tr>
<tr>
<td>Friday</td>
<td>MAY 29, 2015</td>
<td>0800-1100</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1100-1200</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1200-1400</td>
</tr>
<tr>
<td>Monday</td>
<td>JUN 01, 2015</td>
<td>0800-1000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1000-1100</td>
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<td>1100-1200</td>
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<td>1300-1330</td>
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<tr>
<td></td>
<td></td>
<td>1330-1600</td>
</tr>
<tr>
<td>Tuesday</td>
<td>JUN 02, 2015</td>
<td>0800-0900</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0900-1100</td>
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<td>1100-1200</td>
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<td>1200-1400</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1400-1600</td>
</tr>
<tr>
<td>Wednesday</td>
<td>JUN 03, 2015</td>
<td>0800-0400</td>
</tr>
<tr>
<td>Thursday</td>
<td>JUN 4, 2015</td>
<td>0800-1200</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1200-1300</td>
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<tr>
<td></td>
<td></td>
<td>1300-1600</td>
</tr>
<tr>
<td>Date</td>
<td>Event</td>
<td>Instructor</td>
</tr>
<tr>
<td>------</td>
<td>-------</td>
<td>------------</td>
</tr>
<tr>
<td>June 8 0800-1600</td>
<td>Taser</td>
<td>Sgt Smiddy PO Bradley</td>
</tr>
</tbody>
</table>

This is to certify that I have received the training orientation listed.

Name: [Signature] #52  
Supervisor: [Signature]  

Date: 06/06/15  
Date: 06/06/15
May 8, 2015

Mr. Robert Lenz

Dear Mr. Lenz:

Welcome to the Cuyahoga Metropolitan Housing Authority Police Department (CMHAPD). Prior to this letter, you should have received correspondence from our Human Resources Department advising you of your first day, Friday, May 22, 2015. You are to report directly to CMHA main campus located at 8120 Kinsman Ave. for general orientation.

A Swearing-In/ Recognition will occur on Thursday, May 21, 2015 at 11:00 a.m. in the Multi-purpose Room of CMHA Police Department located at 5715 Woodland Ave. You are encouraged to invite family and friends to the brief Swearing-In Ceremony which will commence promptly at 11:00 a.m.

Immediately following the Ceremony, family and friends who may want to see more of the facility will be given a tour of the building. Afterwards, you will be permitted to leave for the day.

Should you have any questions regarding this letter, please contact our Administrative Assistant, Ms. Terrissi Suber-Bey at 426-7775 during normal business hours.

Again, the CMHA Police Department welcomes you and looks forward to seeing you on your first day, Friday, May 22, 2015.

Sincerely,

William Likes,
Commander

P.S: Proper attire for the day is long-sleeved white shirt, black or dark blue dress slacks and shoes, and a black or dark blue tie.
# Equipment Receipt

**Issued**

**Equipment Receipt**

**Cuyahoga Metropolitan Housing Authority Police Department**

**Received** __**8**__ **day of **__**June**__ __**2015**__ **from**

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Initials</th>
<th>Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Breast Badge</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2) Hat Badge</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3) Photo Identification</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4) ADT Swipe Card</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5) Door Key(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6) Radio Case/Battery</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7) Night Stick</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8) Night Stick Holder</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9) ASP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10) ASP Holder</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11) OC Spray</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12) OC Spray Case</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13) Glock 45 Model 21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14) Extra Magazines (Glock)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15) Rules &amp; Regs Manual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17) OCC Manual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18) Pocket TORC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19) Issued Holster &amp; Mag Pouches</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20) Bullet Resistant Vest</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21) Short Sleeve Shirts <strong><strong>x1</strong></strong></td>
<td><strong><strong>2</strong></strong></td>
<td></td>
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<tr>
<td>22) Long Sleeve Shirts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23) Blauer Jacket</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24) Hat</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25) Rain Coat <strong><strong>x1</strong></strong></td>
<td><strong><strong>2</strong></strong></td>
<td></td>
</tr>
<tr>
<td>26) Rain Cap</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27) Pants <strong><strong>x1</strong></strong></td>
<td><strong><strong>2</strong></strong></td>
<td></td>
</tr>
<tr>
<td>28) Skirts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>29) Ties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30) Sweater</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

20 through 30 shall be returned only if the officer served less than 1 year with the department.

**Date**: __8__ **June** __2015__  
**Recipient Printed Name**: __Robert A. Leuz #52__  
**Signature of Recipient**: __

**Date**: __8__ **June** __2015__  
**Supervisor Printed Name**: __

**Signature of Supervisor**: __

CMHPD94-028A
EXERCISE FACILITY DISCLAIMER: THE CUYAHOGA METROPOLITAN HOUSING AUTHORITY (CMHA) AND THE CMHA DIVISION OF POLICE ARE NOT RESPONSIBLE FOR ANY DAMAGE TO THE PERSONAL PROPERTY, OR LOSS OF PROPERTY, OR FOR ANY INJURY TO ANY PERSON SUFFERED WHILE TRAINING, PRACTICING, OR IN ANY OTHER WAY INVOLVED IN THE PHYSICAL TRAINING ACTIVITIES HELD AT THE CMHA DIVISION OF POLICE EXERCISE FACILITY FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF THE CUYAHOGA METROPOLITAN HOUSING AUTHORITY, CMHA DIVISION OF POLICE, ITS AGENTS, OR EMPLOYEES.

In consideration of my participation in a training program or my individual use of the CMHA Division of Police exercise facility, I hereby release and covenant not-to-sue or file any other action against the Cuyahoga Metropolitan Housing Authority, the CMHA Division of Police, and any of its employees, instructors, or agents, from any and all present and future claims resulting from ordinary negligence on the part of the Cuyahoga Metropolitan Housing Authority, the CMHA Division of Police or others listed for property damage, personal injury, or wrongful death arising as a result of my engaging in any training activity or receiving instruction in physical training activities (e.g., physical conditioning, fitness training and strength training) or any activities incidental thereto, wherever, whenever, or however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future, that may be made by me, my family, estate, heirs, or assigns.

Further, I am aware that physical training is a vigorous activity involving cardiovascular stress and active physical contact. I understand that physical training involves certain risk of injury, including but not limited to, death, spinal injuries, and injury to bones, joints and muscles. I am voluntarily participating in this training with the knowledge of the risk involved and hereby agree to accept any and all inherent risks of property damage, personal injury, or death.

I further agree to indemnify and hold harmless the Cuyahoga Metropolitan Housing Authority, the CMHA, Division of Police and others listed for any and all claims arising as a result of my engaging in or receiving instruction in physical training activities or any activities incidental thereto, wherever, whenever, or however the same may occur. I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of Ohio and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceeding shall be in Ohio. I affirm that I am freely signing this agreement. I have read this form and fully understand that by signing this form, I am giving up legal rights and/or remedies which may be available to me for the ordinary negligence of the Cuyahoga Metropolitan Housing Authority, the CMHA Division of Police, or any of the parties listed above.

Signature and Badge # or Employee/Participant/User

Print Name

Date
### Attendance Point Information

<table>
<thead>
<tr>
<th></th>
<th>Tardy (T)</th>
<th>AWOL (O)</th>
<th>LWOP (W)</th>
<th>Unexcused Sick (U)</th>
<th>No Punch In (Q)</th>
<th>Monthly Total</th>
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</thead>
<tbody>
<tr>
<td>Jan</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0.5</td>
<td>0.5</td>
</tr>
<tr>
<td>Mar</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**Total Attendance Points during 2017:** 0.5

**Current Attendance Points:** 0

**Current Attendance Point Status:** Safe

### Sick Abuse Event Information

| Current Sick Abuse Events: | 0 |
| Current Event Status:     | Safe |
| Abuse Points Calculated Range: | N/A |

### Comments

<table>
<thead>
<tr>
<th>Date</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>3/13/2017</td>
<td>Exused</td>
</tr>
<tr>
<td>2/24/2017</td>
<td>Approved 646</td>
</tr>
<tr>
<td>3/11/2017</td>
<td>650</td>
</tr>
<tr>
<td>3/12/2017</td>
<td>646</td>
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<tr>
<td>3/15/2017</td>
<td>Active Shooter Training</td>
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<tr>
<td>4/4/2017</td>
<td>2017 In Service</td>
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<tr>
<td>4/7/2017</td>
<td>Military Leave/Approved by 650</td>
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<td>5/7/2017</td>
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<td>5/11/2017</td>
<td>Approved 646</td>
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<td>5/15/2017</td>
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<tr>
<td>6/2/2017</td>
<td>Called off after being verbally denied off-632/No DR. slip received.</td>
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<tr>
<td>6/3/2017</td>
<td>approved by 632</td>
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<td>6/9/2017</td>
<td>632 approved</td>
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<td>6/17/2017</td>
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</tr>
<tr>
<td>7/7/2017</td>
<td>Approved 654</td>
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<td>7/8/2017</td>
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<tr>
<td>8/13/2017</td>
<td>632</td>
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<tr>
<td>8/17/2017</td>
<td>Street Drug Recognition and Identification (OPOTA Richfield)</td>
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<tr>
<td>8/21/2017</td>
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<td>8/25/2017</td>
<td>632</td>
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<td>Street Drug OPOTA Richfield</td>
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<td>9/11/2017</td>
<td>CPR Training</td>
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<td>9/19/2017</td>
<td>In Lieu of RDO 21SEP</td>
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<tr>
<td>9/20/2017</td>
<td>-Training Testifying in Court (OPOTA - London)</td>
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<td>-Training Testifying in Court (OPOTA - London)</td>
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<td>9/22/2017</td>
<td>In Lieu of RDO 20SEP</td>
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<td>9/25/2017</td>
<td>FTO - OPOTA</td>
</tr>
<tr>
<td>10/5/2017</td>
<td>IFAK 1900-2300</td>
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<tr>
<td>10/7/2017</td>
<td>632</td>
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<tr>
<td>10/12/2017</td>
<td>Approved 654</td>
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<tr>
<td>10/14/2017</td>
<td>days off switched due to training</td>
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<td>Survival Spanish (OPOTA Richfield)</td>
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<tr>
<td>11/6/2017</td>
<td>Day off switched due to training</td>
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<tr>
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<td>Counter Ambush Tactics (Summit County)</td>
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<td>Counter Ambush Tactics (Summit County)</td>
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<tr>
<td>11/9/2017</td>
<td>Counter Ambush Tactics (Summit County)</td>
</tr>
<tr>
<td>12/2/2017</td>
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</tr>
<tr>
<td>12/14/2017</td>
<td>Open Enrollment-1300-1700 - Woodhill Community Center</td>
</tr>
<tr>
<td>Date</td>
<td>Comment</td>
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<tr>
<td>3/17/2018</td>
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</tr>
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<td>3/31/2018</td>
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<tr>
<td>4/9/2018</td>
<td>650</td>
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<tr>
<td>4/18/2018</td>
<td>Emergency Vehicle Operations</td>
</tr>
<tr>
<td>5/18/2018</td>
<td>Memorial</td>
</tr>
<tr>
<td>6/12/2018</td>
<td>Police and Fire Games</td>
</tr>
<tr>
<td>6/15/2018</td>
<td>Cancelled Comp Days</td>
</tr>
<tr>
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<td>7/8/2018</td>
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</tr>
<tr>
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</tr>
<tr>
<td>7/31/2018</td>
<td>approved KJR</td>
</tr>
<tr>
<td>8/1/2018</td>
<td>approved 628</td>
</tr>
<tr>
<td>8/25/2018</td>
<td>approved by 636</td>
</tr>
<tr>
<td>9/10/2018</td>
<td>In-Service</td>
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<td>Approved by 650</td>
</tr>
<tr>
<td>9/20/2018</td>
<td>Approved 650</td>
</tr>
<tr>
<td>10/7/2018</td>
<td>Death in Family</td>
</tr>
<tr>
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<td>Approved 650</td>
</tr>
<tr>
<td>12/11/2018</td>
<td>Open Enrollment 1330-1700</td>
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**Lenz, Robert attendance record for 2019**

<table>
<thead>
<tr>
<th>Date</th>
<th>Comment</th>
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</thead>
<tbody>
<tr>
<td>1/18/2019</td>
<td>Approved 628</td>
</tr>
<tr>
<td>6/17/2019</td>
<td>Approved 646</td>
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<tr>
<td>5/5/2019</td>
<td>Entered by 656</td>
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<tr>
<td>5/16/2019</td>
<td>Police Memorial 1st Shift</td>
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<tr>
<td>5/30/2019</td>
<td>Entered by 656</td>
</tr>
<tr>
<td>6/1/2019</td>
<td>Approved 650</td>
</tr>
<tr>
<td>6/9/2019</td>
<td>Approved 646</td>
</tr>
<tr>
<td>5/25/2019</td>
<td>Days off switched due to training at OPOTA-</td>
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<tr>
<td>5/29/2019</td>
<td>Days off switched due to training at OPOTA-</td>
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<tr>
<td>12/24/2019</td>
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<tr>
<td>12/19/2019</td>
<td>Taser</td>
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<tr>
<td>12/27/2019</td>
<td>#630</td>
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**Attendance Point Information**
- Total Attendance Points during 2019: 0
- Current Attendance Points: 0
- Current Attendance Point Status: Safe

**Sick Abuse Event Information**
- Current Sick Abuse Events: 0
- Current Event Status: Safe
- Abuse Points Calculated Range: N/A

**Comments**
- Total Comments: 13
### Attendance Point Information

- **Current Attendance Points:** 0
- **Current Attendance Point Status:** Safe

### Sick Abuse Event Information

- **Current Sick Abuse Events:** 0
- **Current Event Status:** Safe
- **Abuse Points Calculated Range:** N/A

### Comments

<table>
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<th>Comment</th>
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<tbody>
<tr>
<td>1/12/2020</td>
<td>#630 Event #1 Called off sick day after RDO</td>
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<tr>
<td>1/13/2020</td>
<td>634 - CPR/First Aid Training</td>
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<td>1/21/2020</td>
<td>632</td>
</tr>
<tr>
<td>3/26/2020</td>
<td>In service</td>
</tr>
</tbody>
</table>
May 10, 2018

Dear Robert Lenz, Jr.,

Congratulations on your recent nomination for the CMHA Champion Award. As you may be aware, an employee and supervisor are presented with this award every month in recognition of their exceptional service to CMHA.

Although another co-worker was selected for the award this month, I personally would like to thank you for your hard work, dedication, and positive influence towards our residents, participants, vendors, and fellow employees of the Agency. Please know that your actions and high achievements have not gone unnoticed and I appreciate the work that you do on behalf of CMHA.

It is an exciting time at CMHA because of employees like you who take pride in the duties they perform. Together, we will be able to accomplish so much and make an impact on the residents we serve of Cuyahoga County.

Thank you for making a difference and keep up the good work!

Sincerely,

Jeffery K. Patterson
Chief Executive Officer
CUYAHOGA METROPOLITAN HOUSING AUTHORITY (CMHA)
VEHICLE OPERATIONS PROCEDURE
ORIENTATION AND CHECK-OFF

I have received a copy of the CMHA Vehicle Operations Procedure Orientation and Check-Off. I have read and understand the material.

I understand that I may examine the complete Vehicle Operations Manual if I desire, and that there is information therein which can clarify issues and assist me in operating a vehicle for CMHA.

I agree to comply with the provisions of the Vehicle Operations Procedure, and understand that failure to abide by them may result in disciplinary action up to and including dismissal.

LEWIS, ROBERT A
Print Name

Title

Date

Signature

Department

Witness