

City of Utica



Utica, New York

To The City Clerk of Utica

*As provided by Section 12 of the Second Class Cities Laws, I hereby
certify that*

Name: Aaron W. Llewellyn

Address: [REDACTED]

Telephone:

has this day been appointed to the position of Police Officer

in the department of Public Safety- Bureau Of Police

the term to commence September 9, 2013

the term to end N/A

filling unexpired term of (if applicable)

Signed

Mayor

Title of Official

PERFORMANCE EVALUATION REPORT

NAME (FIRST, LAST, MI) Aaron Llewellyn	ID # [REDACTED]	RANK PtIm	DIVISION/UNIT A-3
DUTY ASSIGNMENT (I.E. DESK, STREET PATROL, BOOKING) Street Patrol	PERIOD COVERED Annual	FROM 1/1/19	TO 12/31/19

PERFORMANCE LEVEL DEFINITIONS

OUTSTANDING = 5

VERY GOOD = 4

ACCEPTABLE = 3

NEEDS IMPROVEMENT = 2

UNSATISFACTORY = 1

In making the evaluation of each category below, supervisors are to evaluate the employee's performance only for the past Twelve month period and compare that performance to guidelines established in section 6.15 C (1 through 18) of General Order # 02-47 Personnel Performance Evaluations.

1. DUTY PERFORMANCE (ALL EMPLOYEES)

4	PERSONAL APPEARANCE	3	COMMAND PRESENCE	4	REPORT WRITING ABILITY	4	INTERPERSONAL SKILLS (VERBAL)
4	RESPONSIVENESS TO SUPERVISION	2	ATTENDANCE	4	RELIABILITY	4	PERFORMANCE UNDER STRESS
3	PERFORMANCE	4	PUNCTUALITY	4	INVESTIGATIVE/PROBLEM SOLVING SKILLS		
3	JUDGMENT	4	CARE AND USE OF EQUIPMENT	3	KNOWLEDGE OF LAWS, POLICIES, ETC		

2. DAYS LOST DURING PERIOD COVERED BY THIS REPORT

SICK: 16 INJURED ON-DUTY: INJURED OFF-DUTY: OTHER: TOTAL OCCURENCES: 16

3. SUPERVISORY PERSONNEL ONLY

LEADERSHIP QUALITIES

EFFECTIVENESS OF DELEGATION

TRAINING/COACHING OF SUBORDINATES

EVALUATION OF SUBORDINATES

4. NARRATIVE SECTION (This section is to be used to record specific and personal characteristics of this employee which are not adequately covered in the rating sections above. Any factors rated as a 1 or a 5 in the above sections must be articulated in this section.)

Officer Llewellyn has been with the department for 6 and a half years

Attendance (2) -- Officer Llewellyn used 16 sick days during the 2019 calendar year

General Appearance (4) -- Officer Llewellyn always has a pressed and neat uniform, and boots are shined

Report Writing (4) -- Officer Llewellyn writes well written and understandable reports

Command Presence (3) -- Officer Llewellyn does a good job taking control of any situation.

Responsiveness to Supervision (4) -- Officer Llewellyn when asked to do something always completes the task or assignment without asking why or complaining about the assignment.

Knowledge of Laws/Policies (3) -- Officer Llewellyn is still learning and becoming a seasoned Officer. When he has a question regarding a law or Department policy he usually asks for clarification.

Investigative/Problem solving (4) -- Officer Llewellyn conducts investigations and is able to solve most problems on his own

How can this employee best improve his/her performance? (Include setting Career /Performance Goals).

Officer Llewellyn is becoming a very good officer for our department. He needs to apply himself more and I believe within a few years will become an asset that younger officers will rely on.

(Continue on Back)


(Goal settings Continue From Front)

5. OVERALL PERFORMANCE RATING: This overall rating is to be based on the following factors:

- A. The employee's performance in his/her present assignment during the evaluation period; AND
B. Consideration of the general needs of the Department, comparing the capabilities and characteristics of this employee to all other employees of equal rank and pay grade known to the evaluator.

☐ OUTSTANDING ☐ VERY GOOD ☒ ACCEPTABLE ☐ NEEDS IMPROVEMENT ☐ UNSATISFACTORY

6. REVIEWING COMMANDING OFFICER (Immediate Supervisor)

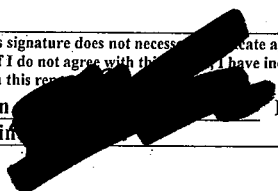
Signature Howard Brodt  Rank Howard Brodt Lieutenant Date 1/18/2020
Print/Signature

7. SUPERVISOR REVIEWING WITH

Signature Kevin Strife  Rank Kevin Strife Sergeant Date 1/22/2020

8. EMPLOYEE'S COMMENTS: (Optional)

9. EMPLOYEE'S SIGNATURE: This signature does not necessarily indicate agreement with this report. It verifies that this report has been personally reviewed with me and that I have received a copy of this report. If I do not agree with this report, I have indicated this by writing "under protest" next to my signature. I have also indicated whether I "request appeal" or "waive appeal" on this report.

Signature Aaron Llewellyn  Rank PT Ptlm Date 1/22/2020
Print/Signature

PERFORMANCE EVALUATION REPORT

NAME (FIRST, LAST, MI) Llewellyn, Aaron W	ID # [REDACTED]	RANK Ptlm	DIVISION/UNIT Patrol
DUTY ASSIGNMENT (I.E. DESK, STREET PATROL, BOOKING) Street Patrol	PERIOD COVERED 2018	FROM 1/1/18	TO 12/31/18

PERFORMANCE LEVEL DEFINITIONS EXCELLENT = 5 GOOD = 4 ACCEPTABLE = 3 NEEDS IMPROVEMENT = 2 UNSATISFACTORY = 1 In making the evaluation of each category below, supervisors are to evaluate the employee's performance only for the past Twelve month period and compare that performance to guidelines established in section 6.15 C (1 through 18) of General Order # 02-47 Personnel Performance Evaluations.			
1. DUTY PERFORMANCE (ALL EMPLOYEES)			
4	GENERAL APPEARANCE	4	ASSIGNMENT TASKS
3	RESPONSIVENESS TO SUPERVISION	4	WORK QUALITY
3	INITIATIVE	4	RELIABILITY
3	JUDGMENT	4	INVESTIGATIVE/PROBLEM SOLVING SKILLS
3	COMMAND PRESENCE	5	INTERACTION WITH PUBLIC
		3	KNOWLEDGE OF LAWS, POLICIES, ETC.
		4	REPORT WRITING ABILITY
		3	INTERACTION WITH OTHER MEMBERS OF THE DEPARTMENT
		3	COMMUNICATION SKILLS (VERBAL)

2. SUPERVISORY PERSONNEL ONLY			
LEADERSHIP QUALITIES	EFFECTIVENESS OF DELEGATION	TRAINING/COACHING OF SUBORDINATES	EVALUATION OF SUBORDINATES

3. NARRATIVE SECTION (This section is to be used to record specific and personal characteristics of this employee which are not adequately covered in the rating sections above. Any factors rated as a 1 or a 5 in the above sections must be articulated in this section.)

Attendance - PO Llewellyn utilized eleven sick days during this rating period. He should improve in this area moving forward.

Appearance - PO Llewellyn passed all uniform inspections during this rating period. His uniform is pressed and his boots are polished.

Performance Under Stress - During this rating period PO Llewellyn responded to a shooting and upon arrival the victim was losing a substantial amount of blood. PO Llewellyn and his partner realized this and applied a tourniquet to slow the bleeding. This action potentially saved the victim's life.

Interaction with the Public - PO Llewellyn was commended by a member of the community for his compassion and professionalism while handling a parking complaint.

Knowledge of Laws - PO Llewellyn has a working knowledge of the Penal and Criminal Procedural Laws. Although his knowledge allows him to operate during his day to day patrol, with the amount of time with the department he should strive to expand his knowledge further.

How can this employee best improve his/her performance? (Include setting Career /Performance Goals).

PO Llewellyn is a valued member of the Patrol Division. In order to expand his knowledge of policing he should look to attend trainings in the future. Further, PO Llewellyn should strive to become a Field Training Officer for our agency as I believe he would do well in this position.

(Continue on Back)

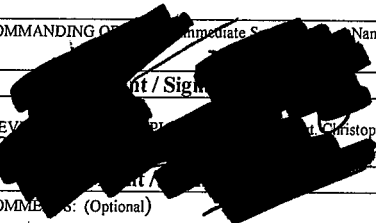
(Goal settings Continue From Front)

4. OVERALL PERFORMANCE RATING: This overall rating is to be based on the following factors:

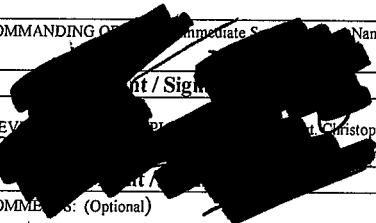
- A. The employee's performance in his/her present assignment during the evaluation period; AND
B. Consideration of the general needs of the Department, comparing the capabilities and characteristics of this employee to all other employees of equal rank and pay grade known to the evaluator.

☐ EXCELLENT ☒ GOOD ☐ ACCEPTABLE ☐ NEEDS IMPROVEMENT ☐ UNSATISFACTORY

5. REVIEWING COMMANDING OFFICER: Immediate Supervisor Name:

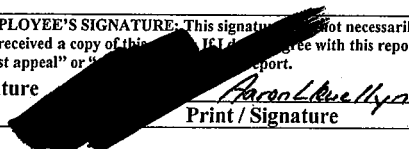
Signature  Rank LT. Date 1/28/19

6. SUPERVISOR REVIEW: Supervisor Name: Christopher Fanigula

Signature  Rank SAT Date 1-26-19

7. EMPLOYEE'S COMMENTS: (Optional)

8. EMPLOYEE'S SIGNATURE: This signature does not necessarily indicate agreement with this report. It verifies that this report has been personally reviewed with me and that I have received a copy of this report. If I do not agree with this report, I have indicated this by writing "under protest" next to my signature. I have also indicated whether I "request appeal" or "do not request appeal".

Signature  Rank Patrolman Date 1/26/19
Print / Signature Patrolman

PERFORMANCE EVALUATION REPORT

NAME (FIRST, LAST, MI) Aaron Llewellyn	ID # [REDACTED]	RANK Ptln.	DIVISION/UNIT B-3
DUTY ASSIGNMENT (I.E. DESK, STREET PATROL, BOOKING) Street Patrol	PERIOD COVERED 1 year	FROM 01/01/17	TO 12/31/17

PERFORMANCE LEVEL DEFINITIONS

EXCELLENT = 5

GOOD = 4

ACCEPTABLE = 3

NEEDS IMPROVEMENT = 2

UNSATISFACTORY = 1

In making the evaluation of each category below, supervisors are to evaluate the employee's performance only for the past Twelve month period and compare that performance to guidelines established in section 6.15 C (1 through 18) of General Order # 02-47 Personnel Performance Evaluations.

1. DUTY PERFORMANCE (ALL EMPLOYEES)

4	GENERAL APPEARANCE	4	ASSIGNMENT TASKS	3	WORK QUALITY	3	KNOWLEDGE OF LAWS, POLICIES, ETC.
3	RESPONSIVENESS TO SUPERVISION	3	ATTENDANCE	4	RELIABILITY	3	REPORT WRITING ABILITY
4	INITIATIVE	3	PUNCTUALITY	3	INVESTIGATIVE/PROBLEM SOLVING SKILLS	4	INTERACTION WITH PUBLIC
3	JUDGMENT	4	CARE AND USE OF EQUIPMENT	4	INTERACTION WITH OTHER MEMBERS OF THE DEPARTMENT		
4	COMMAND PRESENCE	4	PERFORMANCE UNDER STRESS	3	COMMUNICATION SKILLS (VERBAL)		

2. SUPERVISORY PERSONNEL ONLY

LEADERSHIP QUALITIES

EFFECTIVENESS OF DELEGATION

TRAINING/COACHING OF SUBORDINATES

EVALUATION OF SUBORDINATES

3. NARRATIVE SECTION (This section is to be used to record specific and personal characteristics of this employee which are not adequately covered in the rating sections above. Any factors rated as a 1 or a 5 in the above sections must be articulated in this section.)

Ptln. Llewellyn completed 4 years of service during this period.

Ptln. Llewellyn always presents a neat and polished appearance and passes all uniform inspections.

Ptln. Llewellyn utilized 6 sick days during this period and failed to call in or show up for his shift on December 23rd.

Ptln. Llewellyn is a proactive officer and is frequently a Top Performer for monthly totals.

Ptln. Llewellyn completes assignments and tasks when directed, though he sometimes hesitates.

Ptln. Llewellyn successfully completed the Instructor Development Course this year.

How can this employee best improve his/her performance? (Include setting Career /Performance Goals).

Ptln. Llewellyn is one of the more senior officers in B Platoon and he should start taking more of a leadership role. He should put in for more trainings and FTO School so that he can impart his knowledge and experience onto newer officers. Ptln. Llewellyn should look more into advancing his career as he is now in his 5th year of service. He should take the Sergeant's exam the next time it is offered.

(Continue on Back)

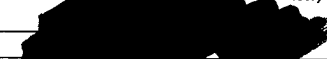
(Goal settings Continue From Front)

4. OVERALL PERFORMANCE RATING: This overall rating is to be based on the following factors:

- A. The employee's performance in his/her present assignment during the evaluation period; AND
B. Consideration of the general needs of the Department, comparing the capabilities and characteristics of this employee to all other employees of equal rank and pay grade known to the evaluator.

☐ EXCELLENT ☒ GOOD ☐ ACCEPTABLE ☐ NEEDS IMPROVEMENT ☐ UNSATISFACTORY

5. REVIEWING COMMANDER (Print Name of Supervisor) Name:


Signature  Rank Lt. Date 1/16/18

6. SUPERVISOR REVIEW WITH EMPLOYEE

Signature Aaron Leveley Rank SGT Date 1/16/18
Print / Signature 

7. EMPLOYEE'S COMMENTS: (Optional)

8. EMPLOYEE'S SIGNATURE: This signature does not necessarily indicate agreement with this report. It verifies that this report has been personally reviewed with me and that I have received a copy of this report. If I do not agree with this report, I have indicated this by writing "under protest" next to my signature. I have also indicated whether I "request appeal" or "do not request appeal" on this report.

Signature  Rank Patrolman Date 1/16/18
Print / Signature Aaron Leveley

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 04 DAY 01 YEAR 2020

TO:
Utica Civil Service Commission

NAME OF EMPLOYEE:
Llewellyn, Aaron

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:
Police Department

TITLE OF POSITION:
Police Officer

SALARY:
\$ 77,179.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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- ☐ Permanent
☐ Provisional
☐ Temporary
☐ Substitute
☐ For Term of Office
☐ Permanent Promotion
☐ Provisional Promotion
☐ Non-Competitive Class
☐ Exempt Class
☐ Labor Class

From: To:
From: To:
From: To:

Return report of Certification
Attach application (MSD-330)
State length of employment
Give facts under Remarks
Give facts under Remarks
Return report of Certification
Attach nomination
Attach application (MSD-330)
Submit this form only
Attach application (MSD-330)

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- ☐ Resignation
☐ Retirement
☐ Deceased
☐ Removal
☐ Layoff (Lack of Work or Funds)

Submit signed resignation
Give effective date
Indicate date
Attach copy of proceedings

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- ☐ Military Leave of Absence
☐ Other Leave of Absence
☐ Transfer
☐ Demotion
☐ Suspension
☐ Reinstatement
☐ Change in Classification
☐ New Position
☒ Change in Salary
☐ Change in Name
☐ Other

From: To:

Give facts under Remarks
Give facts under Remarks
Give facts under Remarks
Give facts under Remarks
Give facts under Remarks
Give facts under Remarks
Give facts under Remarks
Submit form MSD-222
Indicate new salary
Give facts under Remarks
Give facts under Remarks

Remarks: (Continue on back if necessary)

3.75% contract inc. eff. 4/1/20

Appointing Officer

Title

Address



By

Date

Mark H. Miller

Chief of Police

3.75% contract inc. eff. 4/1/19

Longevity inc. eff. 9/9/18.

CERTIFICATE
valid until

(Date)

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 04 DAY 01 YEAR 2019

TO:

Utica Civil Service Commission

NAME OF EMPLOYEE:

Llewellyn, Aaron

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:

Police Department

TITLE OF POSITION:

Police Officer

SALARY:

\$ 74,389.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran

☐ Non-Veteran

☐ Disabled Veteran

☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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☐ Permanent

☐ Provisional

☐ Temporary

☐ Substitute

☐ For Term of Office

☐ Permanent Promotion

☐ Provisional Promotion

☐ Non-Competitive Class

☐ Exempt Class

☐ Labor Class

☐ Resignation

☐ Retirement

☐ Deceased

☐ Removal

☐ Layoff (Lack of Work or Funds)

☐ Military Leave of Absence

☐ Other Leave of Absence

☐ Transfer

☐ Demotion

☐ Suspension

☐ Reinstatement

☐ Change in Classification

☐ New Position

☒ Change in Salary

☐ Change in Name

☐ Other

From: To:

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From: To:

Return report of Certification

Attach application (MSD-330)

State length of employment

Give facts under Remarks

Give facts under Remarks

Return report of Certification

Attach nomination

Attach application (MSD-330)

Submit this form only

Attach application (MSD-330)

Submit signed resignation

Give effective date

Indicate date

Attach copy of proceedings

Give facts under Remarks

Give facts under Remarks

From: To:

Give facts under Remarks

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Give facts under Remarks

Give facts under Remarks

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Submt form MSD-222

Indicate new saalry

Give facts under Remarks

Give facts under Remarks

Remarks: (Continue on back if necessary)

3.75% contract inc. eff. 4/1/19

Longevity inc. eff. 9/9/18.

New Contract salary changes eff. 4/1/18
pp. 6/8/18

Appointing Officer

Title

Address

Mark H. Miller

Chief of Police

CERTIFICATE

valid until

(Date)

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 08 YEAR 2018

TO:
Utica Civil Service Commission

NAME OF EMPLOYEE:
Llewellyn, Aaron

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:

Police Department

TITLE OF POSITION:

Police Officer

SALARY:

\$ 71,700.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran

☐ Non-Veteran

☐ Disabled Veteran

☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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☐ Permanent

☐ Provisional

☐ Temporary

☐ Substitute

☐ For Term of Office

☐ Permanent Promotion

☐ Provisional Promotion

☐ Non-Competitive Class

☐ Exempt Class

☐ Labor Class

Return report of Certification

Attach application (MSD-330)

State length of employment

Give facts under Remarks

Give facts under Remarks

Return report of Certification

Attach nomination

Attach application (MSD-330)

Submit this form only

Attach application (MSD-330)

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☐ Resignation

☐ Retirement

☐ Deceased

☐ Removal

☐ Layoff (Lack of Work or Funds)

Submit signed resignation

Give effective date

Indicate date

Attach copy of proceedings

Give facts under Remarks

Give facts under Remarks

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☐ Military Leave of Absence

☐ Other Leave of Absence

☐ Transfer

☐ Demotion

☐ Suspension

☐ Reinstatement

☐ Change in Classification

☐ New Position

☒ Change in Salary

☐ Change in Name

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9/9/18

Remarks: (Continue on back if necessary)

Longevity inc. eff. 9/9/18.

New Contract salary changes eff. 4/1/18
pp. 6/8/18

Appointing Officer

Title

Address

Chief of Police

CERTIFICATE
valid until

(Date)

This certifies that the above
employment is in accordance with
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to law. Subject to any limitation or
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By

Date

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 06 DAY 08 YEAR 2018

TO:
Utica Civil Service Commission

NAME OF EMPLOYEE:
Llewellyn, Aaron

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:
Police Department

TITLE OF POSITION:
Police Officer

SALARY:
\$ 64,977.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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☐ Permanent

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☐ For Term of Office

☐ Permanent Promotion

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☐ Non-Competitive Class

☐ Exempt Class

☐ Labor Class

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Return report of Certification

Attach application (MSD-330)

State length of employment

Give facts under Remarks

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Submit this form only

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Submit signed resignation

Give effective date

Indicate date

Attach copy of proceedings

Give facts under Remarks

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☐ Resignation

☐ Retirement

☐ Deceased

☐ Removal

☐ Layoff (Lack of Work or Funds)

Give facts under Remarks

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Give facts under Remarks

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Submit form MSD-222

Indicate new salary

Give facts under Remarks

Give facts under Remarks

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☐ Military Leave of Absence

☐ Other Leave of Absence

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☐ Reinstatement

☐ Change in Classification

☐ New Position

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4/1/18

Remarks: (Continue on back if necessary)

New Contract salary changes eff. 4/1/18
pp. 6/8/18

Appointing Officer
Title
Address


Chief of Police

CERTIFICATE
valid until

(Date)

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 06 YEAR 2017

TO:
Utica Civil Service Commission

NAME OF EMPLOYEE:
Llewellyn, Aaron

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:

Police Department

TITLE OF POSITION:

Police Officer

SALARY:

\$ 60,049.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran

☐ Non-Veteran

☐ Disabled Veteran

☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer

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☐ Permanent

Return report of Certification

☐ Provisional

Attach application (MSD-330)

☐ Temporary

From: To: State length of employment

☐ Substitute

From: To: Give facts under Remarks

☐ For Term of Office

From: To: Give facts under Remarks

☐ Permanent Promotion

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Attach application (MSD-330)

☐ Exempt Class

Submit this form only

☐ Labor Class

Attach application (MSD-330)

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☐ Resignation

Submit signed resignation

☐ Retirement

Give effective date

☐ Deceased

Indicate date

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Attach copy of proceedings

☐ Layoff (Lack of Work or Funds)

Give facts under Remarks

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☐ Military Leave of Absence

Give facts under Remarks

☐ Other Leave of Absence

From: To: Give facts under Remarks

☐ Transfer

Give facts under Remarks

☐ Demotion

Give facts under Remarks

☐ Suspension

Give facts under Remarks

☐ Reinstatement

Give facts under Remarks

☐ Change in Classification

Give facts under Remarks

☐ New Position

Submit form MSD-222

☒ Change in Salary

9/6/17

Indicate new salary

☐ Change in Name

Give facts under Remarks

☐ Other

Give facts under Remarks

Remarks: (Continue on back if necessary)

Longevity increase eff. 9/6/17

Longevity increase eff. 9/6/16

1% Contract increase effective 10/1/15

Appointing Officer

Title

Address

Chief of Police

CERTIFICATE
valid until

(Date)

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

COPY

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 06 YEAR 2016

TO:
Utica Civil Service Commission

NAME OF EMPLOYEE:
Llewellyn, Aaron

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:
[REDACTED]

DEPARTMENT:
Police Department

TITLE OF POSITION:
Police Officer

SALARY:
\$ 57,556.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:
[REDACTED]

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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- ☐ Permanent
- ☐ Provisional
- ☐ Temporary
- ☐ Substitute
- ☐ For Term of Office
- ☐ Permanent Promotion
- ☐ Provisional Promotion
- ☐ Non-Competitive Class
- ☐ Exempt Class
- ☐ Labor Class

From: To:
From: To:
From: To:

Return report of Certification
Attach application (MSD-330)
State length of employment
Give facts under Remarks
Give facts under Remarks
Return report of Certification
Attach nomination
Attach application (MSD-330)
Submit this form only
Attach application (MSD-330)

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- ☐ Resignation
- ☐ Retirement
- ☐ Deceased
- ☐ Removal
- ☐ Layoff (Lack of Work or Funds)

Submit signed resignation
Give effective date
Indicate date
Attach copy of proceedings

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- ☐ Military Leave of Absence
- ☐ Other Leave of Absence
- ☐ Transfer
- ☐ Demotion
- ☐ Suspension
- ☐ Reinstatement

From: To:

Give facts under Remarks
Give facts under Remarks
Give facts under Remarks
Give facts under Remarks
Give facts under Remarks

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- ☐ Change in Classification
- ☐ New Position
- ☒ Change in Salary
- ☐ Change in Name
- ☐ Other

09/09/16

Give facts under Remarks
Submit form MSD-222
Indicate new salary
Give facts under Remarks
Give facts under Remarks

Remarks: (Continue on back if necessary)

Longevity increase eff. 9/6/16

1% Contract increase effective 10/1/15
Longevity increase eff. 9/6/15.

Appointing Officer

Title

Address



Chief of Police

CERTIFICATE
valid until

(Date)

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 23 YEAR 2015


TO: Utica Civil Service Commission		NAME OF EMPLOYEE: Llewellyn, Aaron	
FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District		ADDRESS: [REDACTED]	
DEPARTMENT: Police Department		TITLE OF POSITION: Police Officer	
NAME AND TITLE OF LAST EMPLOYEE IN POSITION:		SALARY: \$ 54,920	
		<input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman	
		DATE OF BIRTH: [REDACTED] SOCIAL SECURITY NUMBER: [REDACTED]	
A P P O I N T M E N T S	<u>Check Nature of Personnel Change</u>		<u>Date Effective</u>
	<input type="checkbox"/> Permanent		Return report of Certification
	<input type="checkbox"/> Provisional		Attach application (MSD-330)
	<input type="checkbox"/> Temporary		From: To: State length of employment
	<input type="checkbox"/> Substitute		From: To: Give facts under Remarks
	<input type="checkbox"/> For Term of Office		From: To: Give facts under Remarks
	<input type="checkbox"/> Permanent Promotion		Return report of Certification
	<input type="checkbox"/> Provisional Promotion		Attach nomination
	<input type="checkbox"/> Non-Competitive Class		Attach application (MSD-330)
	<input type="checkbox"/> Exempt Class		Submit this form only
T E R M I N A S	<input type="checkbox"/> Labor Class		Attach application (MSD-330)
	<input type="checkbox"/> Resignation		Submit signed resignation
	<input type="checkbox"/> Retirement		Give effective date
	<input type="checkbox"/> Deceased		Indicate date
	<input type="checkbox"/> Removal		Attach copy of proceedings
O T H E R C H A N G E S	<input type="checkbox"/> Layoff (Lack of Work or Funds)		Give facts under Remarks
	<input type="checkbox"/> Military Leave of Absence		Give facts under Remarks
	<input type="checkbox"/> Other Leave of Absence		From: To: Give facts under Remarks
	<input type="checkbox"/> Transfer		Give facts under Remarks
	<input type="checkbox"/> Demotion		Give facts under Remarks
	<input type="checkbox"/> Suspension		Give facts under Remarks
	<input type="checkbox"/> Reinstatement		Give facts under Remarks
	<input type="checkbox"/> Change in Classification		Give facts under Remarks
	<input type="checkbox"/> New Position		Submit form MSD-222
	<input checked="" type="checkbox"/> Change in Salary		10/1/15 Indicate new salary
<input type="checkbox"/> Change in Name		Give facts under Remarks	
<input type="checkbox"/> Other		Give facts under Remarks	

Remarks: (Continue on back if necessary)

1% Contract increase effective 10/1/15

Longevity increase eff. 9/6/15.

Appointing Officer
Title
Address


Chief of Police

CERTIFICATE
valid until

(Date)

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

COPY

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 08 YEAR 2015

TO:

Utica Civil Service Commission

NAME OF EMPLOYEE:

Llewellyn, Aaron

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:

Police Department

TITLE OF POSITION:

Police Officer

SALARY:

\$ 54,376

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran☐ Non-Veteran☐ Disabled Veteran☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel ChangeDate EffectiveAction Necessary by Appointing Officer:A
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S☐ Permanent☐ Provisional☐ Temporary☐ Substitute☐ For Term of Office☐ Permanent Promotion☐ Provisional Promotion☐ Non-Competitive Class☐ Exempt Class☐ Labor Class

From: To:

From: To:

From: To:

Return report of Certification

Attach application (MSD-330)

State length of employment

Give facts under Remarks

Give facts under Remarks

Return report of Certification

Attach nomination

Attach application (MSD-330)

Submit this form only

Attach application (MSD-330)

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S☐ Resignation☐ Retirement☐ Deceased☐ Removal☐ Layoff (Lack of Work or Funds)

Submit signed resignation

Give effective date

Indicate date

Attach copy of proceedings

Give facts under Remarks

Give facts under Remarks

From: To:

From: To:

From: To:

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S☐ Military Leave of Absence☐ Other Leave of Absence☐ Transfer☐ Demotion☐ Suspension☐ Reinstatement☐ Change in Classification☐ New Position☒ Change in Salary☐ Change in Name☐ Other

9/6/15

Submit form MSD-222

Indicate new salary

Give facts under Remarks

Give facts under Remarks

Remarks: (Continue on back if necessary)


Longevity increase eff. 9/6/15.

2% Contract increase effective 4/1/15

Appointing Officer

Title

Address


 Chief of Police

 CERTIFICATE
 valid until

(Date)

 This certifies that the above
 employment is in accordance with
 Law and Rules made in pursuance
 to law. Subject to any limitation or
 condition specified above.

By

Date

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 04 DAY 01 YEAR 2015

TO: Utica Civil Service Commission		NAME OF EMPLOYEE: Llewellyn, Aaron	
FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District		ADDRESS: [REDACTED]	
DEPARTMENT: Police Department		TITLE OF POSITION: Police Officer	SALARY: \$ 50,751
NAME AND TITLE OF LAST EMPLOYEE IN POSITION:		<input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman	
		DATE OF BIRTH:	SOCIAL SECURITY NUMBER: [REDACTED]
	<u>Check Nature of Personnel Change</u>	<u>Date Effective</u>	<u>Action Necessary by Appointing Officer:</u>
A P P O I N T M E N T S	<input type="checkbox"/> Permanent		Return report of Certification
	<input type="checkbox"/> Provisional		Attach application (MSD-330)
	<input type="checkbox"/> Temporary	From: To:	State length of employment
	<input type="checkbox"/> Substitute	From: To:	Give facts under Remarks
	<input type="checkbox"/> For Term of Office	From: To:	Give facts under Remarks
	<input type="checkbox"/> Permanent Promotion		Return report of Certification
	<input type="checkbox"/> Provisional Promotion		Attach nomination
	<input type="checkbox"/> Non-Competitive Class		Attach application (MSD-330)
	<input type="checkbox"/> Exempt Class		Submit this form only
	<input type="checkbox"/> Labor Class		Attach application (MSD-330)
T E R M I O N N A S	<input type="checkbox"/> Resignation		Submit signed resignation
	<input type="checkbox"/> Retirement		Give effective date
	<input type="checkbox"/> Deceased		Indicate date
	<input type="checkbox"/> Removal		Attach copy of proceedings
	<input type="checkbox"/> Layoff (Lack of Work or Funds)		Give facts under Remarks
O T H E R C H A N G E S	<input type="checkbox"/> Military Leave of Absence		Give facts under Remarks
	<input type="checkbox"/> Other Leave of Absence	From: To:	Give facts under Remarks
	<input type="checkbox"/> Transfer		Give facts under Remarks
	<input type="checkbox"/> Demotion		Give facts under Remarks
	<input type="checkbox"/> Suspension		Give facts under Remarks
	<input type="checkbox"/> Reinstatement		Give facts under Remarks
	<input type="checkbox"/> Change in Classification		Give facts under Remarks
	<input type="checkbox"/> New Position		Submit form MSD-222
	<input checked="" type="checkbox"/> Change in Salary	4/1/15	Indicate new salary
	<input type="checkbox"/> Change in Name		Give facts under Remarks
	<input type="checkbox"/> Other		Give facts under Remarks

Remarks: (Continue on back if necessary)

2% Contract increase effective 4/1/15

Longevity increase eff. 9/6/14.

Appointing Officer

Title

Address


Chief of Police

CERTIFICATE
valid until

(Date)

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE


MONTH 10 DAY 01 YEAR 2014

TO: Utica Civil Service Commission		NAME OF EMPLOYEE: Llewellyn, Aaron	
FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District		ADDRESS: [REDACTED]	
DEPARTMENT: Police Department		TITLE OF POSITION: Police Officer	SALARY: \$ 49,756
NAME AND TITLE OF LAST EMPLOYEE IN POSITION:		<input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman	
DATE OF BIRTH:		SOCIAL SECURITY NUMBER: [REDACTED]	
A P P O I N T M E N T S	<u>Check Nature of Personnel Change</u>		<u>Date Effective</u>
	<input type="checkbox"/> Permanent		Return report of Certification
	<input type="checkbox"/> Provisional		Attach application (MSD-330)
	<input type="checkbox"/> Temporary		From: To: State length of employment
	<input type="checkbox"/> Substitute		From: To: Give facts under Remarks
	<input type="checkbox"/> For Term of Office		From: To: Give facts under Remarks
	<input type="checkbox"/> Permanent Promotion		Return report of Certification
	<input type="checkbox"/> Provisional Promotion		Attach nomination
	<input type="checkbox"/> Non-Competitive Class		Attach application (MSD-330)
	<input type="checkbox"/> Exempt Class		Submit this form only
T E R M I N A S	<input type="checkbox"/> Labor Class		Attach application (MSD-330)
	<input type="checkbox"/> Resignation		Submit signed resignation
	<input type="checkbox"/> Retirement		Give effective date
	<input type="checkbox"/> Deceased		Indicate date
	<input type="checkbox"/> Removal		Attach copy of proceedings
O T H E R C H A N G E S	<input type="checkbox"/> Layoff (Lack of Work or Funds)		Give facts under Remarks
	<input type="checkbox"/> Military Leave of Absence		Give facts under Remarks
	<input type="checkbox"/> Other Leave of Absence		From: To: Give facts under Remarks
	<input type="checkbox"/> Transfer		Give facts under Remarks
	<input type="checkbox"/> Demotion		Give facts under Remarks
	<input type="checkbox"/> Suspension		Give facts under Remarks
	<input type="checkbox"/> Reinstatement		Give facts under Remarks
	<input type="checkbox"/> Change in Classification		Give facts under Remarks
	<input type="checkbox"/> New Position		Submt form MSD-222
	<input checked="" type="checkbox"/> Change in Salary		10/1/14 Indicate new saalry
	<input type="checkbox"/> Change in Name		Give facts under Remarks
	<input type="checkbox"/> Other		Give facts under Remarks

Remarks: (Continue on back if necessary)

Contract increase effective 10/1/14
Longevity increase eff. 9/6/14.

Appointing Officer
Title
Address


Chief of Police

CERTIFICATE
valid until

(Date)

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

COPY

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 06 YEAR 2014

TO:
Utica Civil Service Commission

NAME OF EMPLOYEE:
Llewellyn, Aaron

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:

Police Department

TITLE OF POSITION:

Police Officer

SALARY:

\$ 49,263.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran

☐ Non-Veteran

☐ Disabled Veteran

☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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☐ Permanent

Return report of Certification

☐ Provisional

Attach application (MSD-330)

☐ Temporary

From:

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State length of employment

☐ Substitute

From:

To:

Give facts under Remarks

☐ For Term of Office

From:

To:

Give facts under Remarks

☐ Permanent Promotion

Return report of Certification

☐ Provisional Promotion

Attach nomination

☐ Non-Competitive Class

Attach application (MSD-330)

☐ Exempt Class

Submit this form only

☐ Labor Class

Attach application (MSD-330)

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☐ Resignation

Submit signed resignation

☐ Retirement

Give effective date

☐ Deceased

Indicate date

☐ Removal

Attach copy of proceedings

☐ Layoff (Lack of Work or Funds)

Give facts under Remarks

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☐ Military Leave of Absence

Give facts under Remarks

☐ Other Leave of Absence

From:

To:

Give facts under Remarks

☐ Transfer

Give facts under Remarks

☐ Demotion

Give facts under Remarks

☐ Suspension

Give facts under Remarks

☐ Reinstatement

Give facts under Remarks

☐ Change in Classification

Give facts under Remarks

☐ New Position

Submit form MSD-222

☒ Change in Salary

9/6/14

Indicate new salary

☐ Change in Name

Give facts under Remarks

☐ Other

Give facts under Remarks


Remarks: (Continue on back if necessary)

Longevity increase eff. 9/6/14.

Appointing Officer

Title

Address



Chief of Police

CERTIFICATE
valid until

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

(Date)

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 04 DAY 01 YEAR 2014

TO: Utica Civil Service Commission

NAME OF EMPLOYEE:
Llewellyn, Aaron

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:
Police Department

TITLE OF POSITION:
Police Officer

SALARY:
\$ 40,670

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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☐ Permanent

Return report of Certification

☐ Provisional

Attach application (MSD-330)

☐ Temporary

From: To: State length of employment

☐ Substitute

From: To: Give facts under Remarks

☐ For Term of Office

From: To: Give facts under Remarks

☐ Permanent Promotion

Return report of Certification

☐ Provisional Promotion

Attach nomination

☐ Non-Competitive Class

Attach application (MSD-330)

☐ Exempt Class

Submit this form only

☐ Labor Class

Attach application (MSD-330)

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☐ Resignation

Submit signed resignation

☐ Retirement

Give effective date

☐ Deceased

Indicate date

☐ Removal

Attach copy of proceedings

☐ Layoff (Lack of Work or Funds)

Give facts under Remarks

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☐ Military Leave of Absence

Give facts under Remarks

☐ Other Leave of Absence

From: To: Give facts under Remarks

☐ Transfer

Give facts under Remarks

☐ Demotion

Give facts under Remarks

☐ Suspension

Give facts under Remarks

☐ Reinstatement

Give facts under Remarks

☐ Change in Classification

Give facts under Remarks

☐ New Position

Submt form MSD-222

☒ Change in Salary

4/1/14

Indicate new saalry

☐ Change in Name

Give facts under Remarks

☐ Other

Give facts under Remarks

Remarks: (Continue on back if necessary)

Contract Increase effective 4/1/14

Appointing Officer

Title

Address

Chief of Police

CERTIFICATE
valid until

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

(Date)

COPY

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 02 DAY 04 YEAR 2014

TO: Utica Civil Service Commission

NAME OF EMPLOYEE:
Llewellyn, Aaron

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:
Police DepartmentTITLE OF POSITION:
Police OfficerSALARY:
\$ 39872

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel ChangeDate EffectiveAction Necessary by Appointing Officer:A
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S☐ Permanent☐ Provisional☐ Temporary☐ Substitute☐ For Term of Office☐ Permanent Promotion☐ Provisional Promotion☐ Non-Competitive Class☐ Exempt Class☐ Labor Class

From: To:

From: To:

From: To:

Return report of Certification

Attach application (MSD-330)

State length of employment

Give facts under Remarks

Give facts under Remarks

Return report of Certification

Attach nomination

Attach application (MSD-330)

Submit this form only

Attach application (MSD-330)

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A
S☐ Resignation☐ Retirement☐ Deceased☐ Removal☐ Layoff (Lack of Work or Funds)

Submit signed resignation

Give effective date

Indicate date

Attach copy of proceedings

Give facts under Remarks

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S☐ Military Leave of Absence☐ Other Leave of Absence☐ Transfer☐ Demotion☐ Suspension☐ Reinstatement☐ Change in Classification☐ New Position☐ Change in Salary☐ Change in Name☒ Other

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From: To:

Remarks: (Continue on back if necessary)

Appointing Officer

Address

Chief of Police

CERTIFICATE
valid until

(Date)

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

COPY

Report all personnel changes to this form Send ONE COPY prior to payroll affected by this change SUPPLEMENTARY PAYROLL CERTIFICATION AND REPORT OF PERSONNEL CHANGE		DATE					
TO: Utica Civil Service Commission		NAME OF EMPLOYEE: Llewellyn, Aaron					
FROM: (Check only one) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District		ADDRESS: [REDACTED]					
DEPARTMENT: Police Department		TITLE OF POSITION: Police Officer	SALARY: \$ 39872				
NAME AND TITLE OF LAST EMPLOYEE IN POSITION:		<input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman					
		DATE OF BIRTH:	SOCIAL SECURITY NUMBER: [REDACTED]				
	<i>Check Nature of Personnel Change</i>	<i>Date Effective</i>	<i>Action Necessary by Appointing Officer:</i>				
A P P O I N T M E N T S	<input type="checkbox"/> Permanent		Return report of Certification				
	<input type="checkbox"/> Provisional		Attach application (MSD-330)				
	<input type="checkbox"/> Temporary	From: To:	State length of employment				
	<input type="checkbox"/> Substitute	From: To:	Give facts under Remarks				
	<input type="checkbox"/> For Term of Office	From: To:	Give facts under Remarks				
	<input type="checkbox"/> Permanent Promotion		Return report of Certification				
	<input type="checkbox"/> Provisional Promotion		Attach nomination				
	<input type="checkbox"/> Non-Competitive Class		Attach application (MSD-330)				
	<input type="checkbox"/> Exempt Class		Submit this form only				
	<input type="checkbox"/> Labor Class		Attach application (MSD-330)				
T E R M I N A S	<input type="checkbox"/> Resignation		Submit signed resignation				
	<input type="checkbox"/> Retirement		Give effective date				
	<input type="checkbox"/> Deceased		Indicate date				
	<input type="checkbox"/> Removal		Attach copy of proceedings				
	<input type="checkbox"/> Layoff (Lack of Work or Funds)		Give facts under Remarks				
O T H E R C H A N G E S	<input type="checkbox"/> Military Leave of Absence		Give facts under Remarks				
	<input type="checkbox"/> Other Leave of Absence	From: To:	Give facts under Remarks				
	<input type="checkbox"/> Transfer		Give facts under Remarks				
	<input type="checkbox"/> Demotion		Give facts under Remarks				
	<input type="checkbox"/> Suspension		Give facts under Remarks				
	<input type="checkbox"/> Reinstatement		Give facts under Remarks				
	<input type="checkbox"/> Change in Classification		Give facts under Remarks				
	<input type="checkbox"/> New Position		Submit form MSD-222				
	<input type="checkbox"/> Change in Salary		Indicate new salary				
	<input type="checkbox"/> Change in Name		Give facts under Remarks				
	<input checked="" type="checkbox"/> Other		Give facts under Remarks				
	Remarks: (Continue on back if necessary)						
<div style="background-color: black; width: 100%; height: 100%;"></div>		<div style="text-align: right;"> Appointing Officer Title: Chief of Police Address: _____ </div>					
<table style="width: 100%; border: none;"> <tr> <td style="width: 20%; vertical-align: top;"> CERTIFICATE valid until _____ (Date) </td> <td style="width: 40%; vertical-align: top; text-align: center;"> This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above. </td> <td style="width: 20%; vertical-align: top;"> By _____ Date _____ </td> <td style="width: 20%;"></td> </tr> </table>				CERTIFICATE valid until _____ (Date)	This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above.	By _____ Date _____	
CERTIFICATE valid until _____ (Date)	This certifies that the above employment is in accordance with Law and Rules made in pursuance to law. Subject to any limitation or condition specified above.	By _____ Date _____					

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 12 DAY 18 YEAR 2013

TO:
Utica Civil Service Commission

NAME OF EMPLOYEE:
Llewellyn, Aaron

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:
Police Department

TITLE OF POSITION:
Police Officer

SALARY:
\$ 39872

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Click Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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☐ Permanent

☐ Provisional

☐ Temporary

☐ Substitute

☐ For Term of Office

☐ Permanent Promotion

☐ Provisional Promotion

☒ Non-Competitive Class

☐ Exempt Class

☐ Labor Class

From: To:

From: dad To: dasd

From: To:

Return report of Certification

Attach application (MSD-330)

State length of employment

Give facts under Remarks

Give facts under Remarks

Return report of Certification

Attach nomination

Attach application (MSD-330)

Submit this form only

Attach application (MSD-330)

Submit signed resignation

Give effective date

Indicate date

Attach copy of proceedings

Give facts under Remarks

Give facts under Remarks

From: To:

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Submit form MSD-222

Indicate new salary

Give facts under Remarks

Give facts under Remarks

Remarks: (Continue on back if necessary)

Contract Increase effective 04/01/13

Appointing Officer

Title

Address

Chief of Police

CERTIFICATE
valid until

(Date)

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date



Undersheriff Joseph Lisi
Chief Deputy Jonathan Owens

Chief Deputy Lisa Zurek
Chief Deputy Derrick O'Meara

Sheriff Robert M. Maciol

**Law Enforcement Member Deputation
For The
Mobile Field Force - UPD**

*Pursuant to the authority vested in me by Section 654 of the County Law, I hereby
Deputize: Aaron Llewellyn: Police Officer; Utica Police Department, to make arrests outside
the territorial limits of the City of Utica, in performance of his legal obligations as a police officer
or peace officer serving as a member and, or agent of, the Utica Police Department. This
deputation shall take effect on January 14, 2020 and shall expire January 13, 2021.*

I set my hand and seal this 14th day of January, 2020.

Robert M. Maciol
Oneida County Sheriff

Administrative Office
6065 Judd Road Oriskany, NY 13424
Voice (315) 736-8364
Fax (315) 765-2205

Law Enforcement Division
6065 Judd Road Oriskany, NY 13424
Voice (315) 736-0141
Fax (315) 736-7946

Correction Division
6075 Judd Road Oriskany, NY 13424
Voice (315) 768-7804
Fax (315) 765-2327

Civil Division
200 Elizabeth Street Utica, NY 13501
Voice (315) 798-5862
Fax (315) 798-6495

DEPARTMENT OF PUBLIC SAFETY**BUREAU OF POLICE**

413 Oriskany Street West

Utica, New York 13502


5/29/2019**SUBJECT:** Tattoo Brandishing Request**TO:** Chief of Police: Mark W. Williams

Per Chapter 8 Section 2.14D named "Tattoos and Body Modification" of the department Policy and Procedure; I, Patrolman Aaron Llewellyn, am requesting to be able to brandish my current tattoo's henceforth. The tattoo's I possess are not inappropriate, offensive or unprofessional in any nature and do not meet any prohibited criteria as stated in Chapter 8 Section 2.14C of the department Policy and Procedure.

I currently have one tattoo on my left forearm which is of two snakes and one tattoo on my right forearm with is of a dragon. Attached to this request are also pictures of the tattoo's I currently possess.

Thank you for your time and consideration in this matter.

Respectfully,

Ptlm. Aaron Llewellyn **APPROVED**

NAME:

 #4974
Aaron Llewellyn

RANK:

Patrolman





DEPARTMENT OF PUBLIC SAFETY**BUREAU OF POLICE**

413 Oriskany Street West

Utica, New York 13502

1/30/17**INTRA-AGENCY MEMORANDUM****SUBJECT:** Instructor Development Course**TO:** Chief of Police: Mark W. Williams

I am requesting to be considered for the Instructor Development Course, as I am interested in becoming a General Topics Instructor. I meet the minimum qualifications for this course and feel that I am at the point in my career where I can pass on what I have learned to other Officers. I also need this training as a pre-requisite for any specialized instruction opportunities that I am interested in, such as firearms, TASER, Defensive Tactics, Physical Fitness Training, etc. Thank you for considering me for this training opportunity.

NAME:

 4974
Aaron Llewellyn

RANK:

Patrolman

POLICE OFFICER REGISTRY ENTRY FORM - CERTIFICATION OF INITIAL EMPLOYMENT
(Executive Law § 845)

SECTION I - REGISTRANT INFORMATION (To be completed by the registrant)

Were you previously a police officer in NYS? Yes <input type="radio"/> No <input checked="" type="radio"/> Police Officer as defined by NYS Criminal Procedure Law §1.20.	Last Name Llewellyn	First Name Aaron	MI [REDACTED]	Date of Birth [REDACTED]	Gender [REDACTED]	Social Security Number* [REDACTED]
	Home Residence Mailing Address [REDACTED]		City, State, Zip [REDACTED]		County of Home Residence [REDACTED]	
	Home Residence Street Address (if Different) [REDACTED]		City, State, Zip [REDACTED]		City, State, Country of birth (if other than U.S.) [REDACTED]	
I am the person named above. I understand that the information in Section I is part of a written statement that will be presented to the Division of Criminal Justice Services for filing, and I certify that it is true.						
Signature [REDACTED]						Date 9/9/2013

*Pursuant to the New York State Public Access Law, the information on this form shall not be revealed, released, transferred, disseminated or otherwise communicated orally, in writing, or by electronic means other than to the registrant. Disclosure of personal identifying information is voluntary. Refusal to provide personal identifying information shall not result in the denial of any right, benefit, or privilege.

SECTION II - AGENCY INFORMATION (To be completed by the chief law enforcement officer)

Last Name Williams		First Name Mark		MI W	Title of Person Signing Section II Chief of Police	
Name of Law Enforcement Agency Utica Police Department					Telephone [REDACTED]	
Address 413 Oriskany St. W				City, State, ZIP Utica, New York 13502		
Type of Appointment Full-time <input checked="" type="checkbox"/> Part-time <input type="checkbox"/>	Background Check Conducted Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Residency Verified Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Fingerprints submitted to DCJS Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
I am the chief law enforcement officer responsible for appointing the person named in Section I as a police officer of the above named law enforcement agency. I understand that the information in Section II is part of a written statement that will be presented to the Division of Criminal Justice Services for filing, and I certify that it is true to the best of my knowledge and belief. I understand I am responsible for providing the registrant with the requisite training pursuant to §209-q of the General Municipal Law.						
Signature [REDACTED]						Date 9/13/13

SECTION III - CIVIL SERVICE INFORMATION (To be completed by the civil service officer for all registrants Full or Part-time)

Last Name Wrobel		First Name Lori		MI A	Title of Person Signing Section III Executive Secretary	
Name of Civil Service or Personnel Agency City of Utica Civil Service					Telephone (315) - 792-0227	
Address 1 Kennedy Plaza				City, State, ZIP Utica, New York 13502		
Title and Civil Service Classification of the Registrant Police Officer-Competitive						
I am the civil service officer responsible for certifying the appointment of individuals appearing on the payroll of the law enforcement agency named in Section II. I understand that the information in Section III is part of a written statement that will be presented to the Division of Criminal Justice Services for filing, and I certify that it is true to the best of my knowledge and belief.						
Signature [REDACTED]						Date 09-09-13

SECTION IV - OATH OF OFFICE (To be completed by the registrar responsible for recording oaths of office)

Last Name Brenon		First Name Joan		MI M	Title of Person Signing Section IV City Clerk	
Name of Recording Office City of Utica City Clerks Office					Telephone (315) 792-0117	
Address 1 Kennedy Plaza				City, State, ZIP Utica, New York 13502		
Oath of Office Date 09/09/13	Oath of Office Title of the Registrant City Clerk					
I am the officer responsible for recording the oaths of office of individuals appointed as police officers of the law enforcement agency named in Section II. The person named in Section I has filed an oath of office as a police officer, pursuant to an appointment received from the person named in Section II. I understand that the information in Section IV is part of a written statement that will be presented to the Division of Criminal Justice Services for filing, and I certify that it is true to the best of my knowledge and belief.						
Signature [REDACTED]						Date 9-12-13

COPY

Report all personnel changes to this form
Send ONE COPY prior to payroll affected by this change
SUPPLEMENTARY PAYROLL CERTIFICATION AND
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 05 YEAR 2013

TO: Utica Civil Service Commission

NAME OF EMPLOYEE:
Llewellyn, Aaron W

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District
DEPARTMENT:
Police DepartmentTITLE OR POSITION:
Police OfficerSALARY:
\$ 36,258

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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S☒ Permanent☐ Provisional☐ Temporary☐ Substitute☐ For Term of Office☐ Permanent Promotion☐ Provisional Promotion☐ Non-Competitive Class☐ Exempt Class☐ Labor Class

From: To:

From: To:

From: To:

Return report of Certification

Attach application (MSD-330)

State length of employment

Give facts under Remarks

Give facts under Remarks

Return report of Certification

Attach nomination

Attach application (MSD-330)

Submit this form only

Attach application (MSD-330)

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S☐ Resignation☐ Retirement☐ Deceased☐ Removal☐ Layoff (Lack of Work or Funds)

Submit signed resignation

Give effective date

Indicate date

Attach copy of proceedings

Give facts under Remarks

Give facts under Remarks

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Remarks: (Continue on back if necessary)

New employee effective
9/9/2013

Appointing Officer

Title

Address

Chief of Police

CERTIFICATE
valid until

(Date)

This certifies that the above
employment is in accordance with
Law and Rules made in pursuance
to law. Subject to any limitation or
condition specified above.

By

Date

August 13th, 2018

Mark Williams
Chief of Police
413 Oriskany Street West
Utica, New York 13502

Dear Chief Williams:

Myself, Mary Zogby, and Carol Angerosa would like to commend one of your officers; Aaron Llewellyn. Officer Llewellyn responded to our residence, [REDACTED], [REDACTED], August 12th due to a parking related accident.

He was very courteous and kind as we were not quite sure as how to resolve the situation. He answered all our questions and thus we were able to resolve the accident.

Officer Llewellyn is certainly an asset to the Utica Police Department.

Sincerely,

Mary Zogby
[REDACTED]

jmoran

From: mwilliams
Sent: Tuesday, January 09, 2018 11:52 AM
To: allewellyn
Cc: mayor@cityofutica.com; dcinque; enoonan; sdougherty; jmoran
Subject: Re: Great job!

Officer Llewellyn,

I just wanted to take the time to write you and thank you for the excellent job you did at yesterday's shooting incident on the [REDACTED]. I was informed by Captain Don Cinque that you applied a tourniquet to the victim's leg, who was bleeding out profusely. In the opinion of Captain Cinque you may have helped save the life of the victim by your actions.

Thank you for representing the agency proudly.

Megan: place a copy of this email in Officer Llewellyn's personnel file.

Chief of Police Mark W. Williams



City of Utica Police Department

413 Oriskany Street West

[REDACTED]

[REDACTED]

[REDACTED]

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jmoran

From: mwilliams
Sent: Friday, January 05, 2018 12:15 PM
To: mayor@cityofutica.com
Cc: allewellyn; dmahaffy; enoonan; dcinque; sdougherty; jmoran
Subject: Re: Citizen Compliment

Mayor,

Today I received a telephone call from a Gayle Garrett. Gayle has two elderly parents who are both in their 90's. On January 3rd Utica Police Officers Aaron Llewellyn and Dan Mahaffy responded to Garrett's elderly parent's home for an abandoned 911 call at [REDACTED]. The officers knock on the door of the residence and received no answer. Rather than giving up and going back in service, Officers Mahaffy and Llewellyn started knocking on neighbor's doors to inquire further. While doing so Ms. Garrett happened to be just arriving at her parents home to check on their well-being. Once inside the residence the police officer found that Mrs. Garrett's elderly mother had fallen and didn't have the ability to get up on her own. Also the woman's elderly husband could not physically help her either. Officers Mahaffy and Llewellyn assisted the woman off the floor and made sure she didn't need any further medical assistance.

Garrett described Officers Mahaffy and Llewellyn as fantastic, professional and friendly. Garrett said she could not thank them enough.

Great job Aaron and Dan. Thank you for proudly representing the department proudly.

Megan: Please place a copy of this email in each officer's personnel file.

Chief of Police Mark W. Williams



City of Utica Police Department

413 Oriskany Street West

Utica, New York 13502

Office Telephone [REDACTED]

E-mail address: [REDACTED]

jwolf

From: Charles Greco [REDACTED]
Sent: Friday, October 16, 2015 12:43 PM
To: mwilliams; Karen Madden; shauck
Cc: Ashley Bizzari; jwolf; enoonan; bperra; dgymburch; allewellyn; adonaldson; rhartnett; dschultz; escorzafava; bwinkler; enoonan; ckelly; bbansner; dcinque
Subject: RE: Utica Police Department - Thank You!

Thanks, Chief.

Outstanding work everyone.

Ashley, please print the Chiefs e-mail for the Mayor's review.

-Sonny

All the best,

Charles "Sonny" Greco

Chief of Staff

Mayor Robert M. Palmieri

City of Utica

1 Kennedy Plaza

Utica, NY 13502

P [REDACTED]

[REDACTED]

-----Original Message-----

From: mwilliams [REDACTED]
Sent: Friday, October 16, 2015 12:38 PM
To: Charles Greco; Karen Madden; shauck
Cc: Ashley Bizzari; jwolf; enoonan; bperra; dgymburch; allewellyn; adonaldson; rhartnett; dschultz; escorzafava; bwinkler; enoonan; ckelly; bbansner; dcinque
Subject: RE: Utica Police Department - Thank You!

Thank you Sonny.

We've identified the following Utica Police Department personnel who were involved in the incident- Sergeant Benjamin Perra, & Police Officers David Dessens, Aaron Donaldson, Daniel Gymburch, Aaron Llewellyn, Robert Hartnett, Derek Schultz, Eric Scorzafava and Benjamin Winkler.

I'm extremely proud of their actions.

A copy of this email will be placed in each of the officers personnel officers.

Chief of Police Mark W. Williams

City of Utica Police Department

413 Oriskany Street West

Utica, New York 13502

Office Telephone: [REDACTED]

E-mail address: [REDACTED]

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-----Original Message-----

From: Charles Greco [REDACTED]

Sent: Friday, October 16, 2015 8:58 AM

To: Karen Madden [REDACTED]; shauck [REDACTED]

Cc: Ashley Bizzari [REDACTED]; mwilliams [REDACTED]

Subject: RE: Utica Police Department - Thank You!

Good morning, Karen.

My name is Sonny Greco and I am Mayor Palmieri's Chief of Staff.

Thank you for your message and kind words regarding the professionalism of our Utica Police Officers.

I included Chief Williams on this e-mail. Chief, please let me know which Officers responded to this incident so I can inform the Mayor.

Karen, thank you again for contacting us and providing such positive feedback. Have a great day.

-Sonny

All the best,

Charles "Sonny" Greco

Chief of Staff

Mayor Robert M. Palmieri

City of Utica

1 Kennedy Plaza

Utica, NY 13502

Pl [REDACTED]

[REDACTED]

-----Original Message-----

From: Karen Madden [REDACTED]

Sent: Friday, October 16, 2015 8:16 AM

To: [REDACTED]

Cc: Mayor; Charles Greco

Subject: Utica Police Department - Thank You!

Last night my 82 year-old mother [REDACTED]

[REDACTED] The end of the story is good with my mom being safely returned, but it is the middle of this saga that you need to be aware of. Immediately, we had the support of several Utica police officers responding and working toward her safe return. Each of the officers I spoke with was professional, terrific and completely committed to our efforts. It was such a stressful night that I did not manage to get any of the officers names but I did want to convey my gratitude to all involved (including the officer that met me at my home in New Hartford where she ended up). Please pass along my appreciation - your officers rocked it last night!

Sincerely,

[REDACTED]



CITY OF UTICA

DEPARTMENT OF PUBLIC SAFETY


413 ORISKANY STREET WEST UTICA, NEW YORK 13502

Telephone (315) 223-3400 Fax (315) 223-3409

ROBERT PALMIERI
Mayor

MARK W. WILLIAMS
Chief of Police

October 16, 2015


Dear Officer Llewellyn,

I received a call from Christopher Jones. He took the time to call and praise how you responded to a call regarding vandalism to his flowers. He spoke of your kindness and professionalism and admired how you quelled a tense situation. He expressed to me that he was grateful for your actions and that you are an asset to the Utica Police Department.

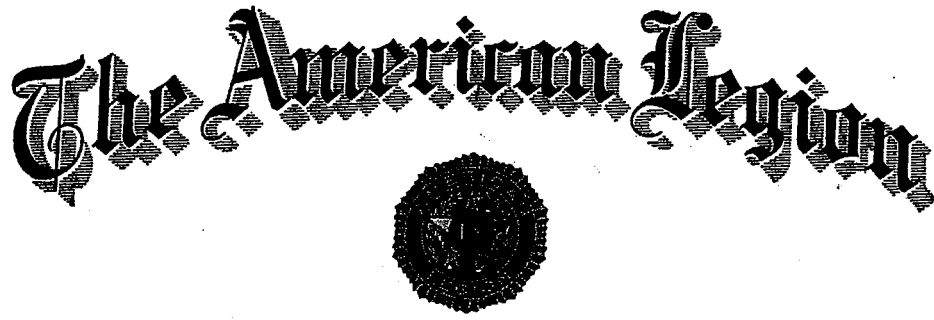
I'm proud of you and how well you represented the Department. Keep up the great work!

Sincerely,



Mark W. Williams
Chief of Police

cc: Mayor Palmieri
Deputy Chief Noonan
Captain Kelly
Lieutenant Cinque



**Law Enforcement
Certificate of Commendation**

Presented To

Officer Aaron Llewellyn

Of

Utica Police Department

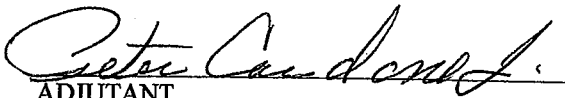
**This Commendation is Awarded for Outstanding
Public Service
Benefiting Our Community, State and Nation**

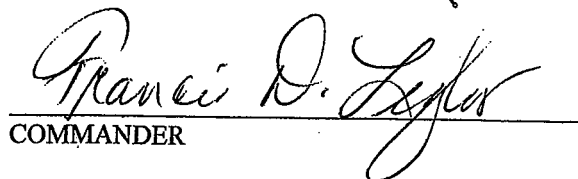
Presented By

**Fort Schuyler Post 1290
Department of NY**

This 24th day of April, 2018

ATTEST


ADJUTANT


COMMANDER



Fort Schuyler Post No 1290

The American Legion



404 KOSSUTH AVENUE

UTICA, NEW YORK 13501

Citation

On January 8, 2018 Utica Police officers Aaron Llewellyn and Dan Mahaffy were first responders of a "shots fired" report in the 1500 block of Conkling Avenue.

At the scene they found an adult male with a gun shot leg wound affecting the femoral artery. He was unconscious due to loss of blood. It should be noted that a person could bleed out in minutes with such a wound. The officers immediately applied a tourniquet correctly stemming the blood flow and in doing so saved his life.

While providing these life saving measures they were able to obtain the name of the suspect in the shooting and that person was subsequently apprehended.

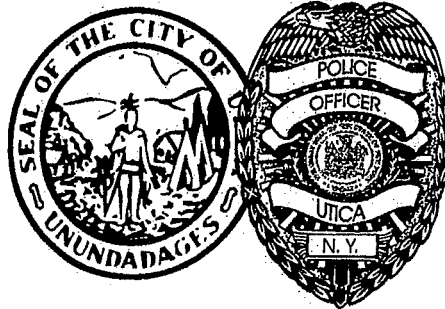
The American Legion Post 1290 salutes these fine officers and commends them for their extraordinary action.


Don Light

Commander

Utica Police Department

UTICA, NEW YORK



Certificate of Commendation EXCEPTIONAL DUTY


Awarded to
**OFFICER AARON LLEWELLYN and OFFICER DANIEL
MAHAFFY**

On January 8, 2018, at approximately 10:35 p.m., units were dispatched to the 1500 block of Conkling Ave. regarding a shots fired call. It was reported that a male had been struck in the thigh and was bleeding in the street. Car 55 Officers Aaron Llewellyn and Daniel Mahaffy were the first ones to arrive on scene.

They immediately began tending to the victim who had lost a large amount of blood and was beginning to show signs of shock. The officers determined the victim needed a tourniquet applied due to the location of the wound and the rapid blood loss. While Officer Llewellyn was applying his department-issued tourniquet, Officer Mahaffy removed his own police jacket and wrapped it around the victim and kept him conscious and talking.

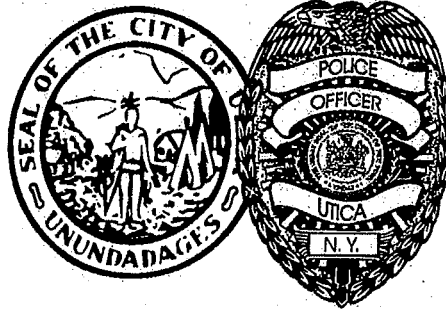
Even while performing these life-saving techniques, the officers did not lose sight of the criminal investigation at hand and were able to get the name of the prime suspect, which later led to his apprehension. The officers' quick thinking, level-headedness and compassion helped save the victim's life and led to the arrest of the offender.

Dated: May 24, 2018


Mark W. Williams, Chief of Police

Utica Police Department

UTICA, NEW YORK



Certificate of Commendation

LIFESAVING

Awarded to

OFFICER AARON LLEWELLYN

On January 8, 2018, at approximately 10:35 p.m., units were dispatched to the 1500 block of Conkling Ave. regarding a shots fired call. It was reported that a male had been struck in the thigh and was bleeding in the street. Car 55 Officers Aaron Llewellyn and Daniel Mahaffy were the first ones to arrive on scene.

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Even while performing these life-saving techniques, the officers did not lose sight of the criminal investigation at hand and were able to get the name of the prime suspect, which later led to his apprehension. The officers' quick thinking, level-headedness and compassion helped save the victim's life and led to the arrest of the offender.

Dated: May 24, 2018

A handwritten signature in cursive script that reads 'Mark W. Williams'.

Mark W. Williams, Chief of Police

State of New York Division of Criminal Justice Services

Hereby Acknowledges and Declares that

Aaron Llewellyn

has attended the

***DWI Detection and Standardized Field
Sobriety Testing Student Refresher Course***

given under the auspices of the

**Warren County Sheriff's Office
Lake George, New York
March 7, 2017**



A handwritten signature in black ink, appearing to read "Michael R. Wood".

Michael R. Wood
Deputy Commissioner



MAGLOCLEN

hereby awards this Certificate of Attendance to

Ptln.

Aaron Llewellyn
UTICA POLICE DEPARTMENT

at the

Terrorist Weapons, Tactics & Techniques

Syracuse, New York
February 22, 2017

Conference Cohosts:

Middle Atlantic-Great Lakes Organized Crime Law Enforcement Network®
U.S. Attorney's Office (NDNY)
Onondaga Community College-Public Safety Training Center
Central New York Association of Chiefs of Police



Patricia A. Borelli
Executive Director

State of New York
Division of Criminal Justice Services
Municipal Police Training Council

Hereby Acknowledges and Declares that

Aaron W. Llewellyn

is certified as a

General Topics Instructor



Ronald G. Spike
Chairman
Municipal Police Training Council



Michael R. Wood
Deputy Commissioner
Division of Criminal Justice Services

UTICA POLICE DEPARTMENT

Mayor Robert Palmieri

Chief Mark W. Williams

LETTER FOR FILE

Officer Joshua Harrington, Officer Robert Hartnett, Officer George DeAngelo, Officer Joseph Cimpi, Officer Aaron Llewellyn and Officer Patrick Murphy

On May 16, 2014, several units were dispatched to 1646 Sunset Ave. regarding a burglary in progress. Upon the officers' arrival, they observed flashlights shining inside of the residence. They also saw movement in a basement window. Officer Hartnett, Officer DeAngelo, and Officer Llewellyn all maintained the perimeter of the residence while Officer Cimpi, Officer Harrington, and Officer Murphy entered the residence in an attempt to locate suspects. While the officers were clearing the building, Officers DeAngelo and Llewellyn located a white male in the basement of the residence through a window. They ordered the male to come to the window and they were able to pull him out of the house and take him into custody. Meanwhile, Officer Hartnett observed another male in the basement through another window and ordered him to exit. The second male was then taken into custody by Officer Hartnett. A short time later, the officers inside of the residence located a third male suspect and took him into custody. The suspects were later charged with burglary, petit larceny, and possession of burglary tools.

Because of the teamwork exhibited by these officers and their coordinated efforts, they were able to safely take three men into custody who were a threat to the community. These officers bring honor to themselves and to the Utica Police Department.

Dated: May 18, 2015



Mark W. Williams, Chief of Police



Certificate Awarded to

Aaron Llewellyn

As evidence of the successful completion of

Criminal Justice Access Testing

This certificate expires:

March 26, 2016

Anne Roest

Anne Roest
Deputy Commissioner
Chief Information Officer
NYS Division of Criminal Justice Services

Steven Cumoletti

Steven Cumoletti
Deputy Superintendent
CJIS Systems Officer
NYS Division of State Police

New York State Integrated Justice Advisory Board

Utica Police Department

Professional Standards

Officer Disciplinary History

Police Officer Aaron W Llewellyn [4974/2013000000009]

Part I - Personal Information

Name: Police Officer Aaron W Llewellyn
: 2013000000009 Badge No: 4974 Hire Dt: 09/09/2013

Department: Patrol Division
Bureau: Uniformed Patrol
Division: Uniformed Patrol

Part II - Discipline History

Printed: Jan 14, 2021 16:29 By:

[REDACTED]

Concise OfficerStacked Incidents Listing

Police Officer Aaron W Llewellyn [4974/2013000000009]

: 2013000000009 Hire date: Sep 09, 2013

Current assignment(s):

Department: Patrol Division
 Bureau: Uniformed Patrol
 Division: Uniformed Patrol

Incidents Listing -----

Received Dt Officers	IA No	Incident type Involved Citizens	Acc Lev	Involved
Sep 12, 2017 Officer Aaron W Llewellyn	MVA2017-0016	Vehicle accident Alexander B Riesel	5	Police
Officer Daniel J Mahaffy				Police

On 9/12/17 Car 55 was involved in a minor MVA on Tuesday, September 12, 2017 at approximately 1324 hours. PO D. Mahaffy (Operator) and PO A. Llewellyn (Passenger) were stopped at the traffic control light facing north bound on Culver Avenue at Bleecker Street, when they were struck in the rear bumper by a 2008 Ford Focus 4-door, color red operated by w/m Alexander B. Riesel, [REDACTED]

Sep 26, 2017 Officer Scott M Berger	2017-039	Internal/Department	5	Police
Officer Joseph R Dare				Police
Officer Titus P Ciccone				Police
Officer Aaron W Llewellyn				Police

This afternoon Lt. Dougherty made Captain Cinque aware of a force incident that occurred in the prisoner bench area this past Saturday. I reviewed the BWC video and it appears that Sgt. Scott Berger chokes and strikes or attempts to strike a prisoner who is handcuffed and being placed in the restraint chair. There are other policy violations as well. It appears that the incident may rise to the level of a PSU investigation but will defer to the Chief.

On 9/29/17 at approximately 1122 hrs, a meeting was held in Deputy Chief; E. Noonan's office, in attendance were the following;

Chief of Police M. Williams
 Deputy Chief E. Noonan
 Captain of Patrol Division D. Cinque
 Lieutenant S. Dougherty (B-Platoon Squad Commander).
 Office of Professional Standard's Sgt. H. Rios
 City of Utica Corporation Counsel Joseph McBride

During this meeting, we reviewed BWC (Body Warn Camera), footage along with the Utica Police Booking area in house camera footage

On 9/29/17 at approximately 1500 hrs, Sgt. S. Berger was placed on a 30 day suspension.

ON 10/11/17 I, met with Lt. Dougherty to see how far his internal investigation of possible misconduct on the part of Sgt. S. Berger had progressed, so that PSU (Office of Professional Standards), can begin with their investigation into the

report of misconduct. Lt. Doughrtey informed me that he was not quite finished with his investigation as of yet.

On 10/11/17 I, requested video footage from the UPD booking area (in house system), through MIS.

On 10/11/17 MIS provided me with three # 3 DVDs of the booking area (see attached MIS request from Sgt. H. Rios to MIS and a copy of the closed ticket from MIS to Sgt. Rios).

on 10/18/17 I was provided an internal investigative packet by Lt. S. Dougherty (Patrol Investigation into the incident).

On 10/19/17 at approximately 1200 hrs, I advised Chief of Police Mark. Williams, that Patrol had finished with their preliminary investigation into the incident and that I was in possession of their investigative packet. After informing Chief Williams of this, I, was then directed by the Chief Williams to begin the IA investigation into the incident.

On 10/19/17, I contacted UPD Sgt. J. Laurey; Sgt Laurey is assigned to the MVPA (Mohawk Valley Police Academy) as the Training Coordinator. Sgt. Laurey is also a DCJS Defense Tactics Instructor. I asked Sgt. Laurey for information regarding what is being taught to officers regarding their response / force authorized to detour a person from spitting on them, during the commission or after the fact of being spit on. Sgt. Laurey told me the following; that the spitting on an officer is only classified in NYS Penal Law as an Harassment (

On 10/23/17 PO Ciccone, Llewellyn and J. Dare were each sent a Professional Standards Memo to report to this office starting at 10:00 am, for an interview to determine what if any involvement / responsibility they had during the incident.

On 10/26/17 the following officers were scheduled for interview with the PSU
10:00: PO T. Ciccone
11:00: PO J. Dare
12:00: PO A. Llewellyn

When all of the above interview were completed, and having a PBA representative available, Inv. Graeff was contacted to see if he was available to respond for a interview. Inv. Graeff informed us that he was, and responded to his interview as asked.

See attached completed narrative. When the investigation was complete Sgt. Berger agreed to take a Demotion in full satisfaction of the charges.

Jan 10, 2018	UOF2018-0007	Use of force	5	Police
Officer Rocco Zasa		Antwuan L. Brown		Police
Officer Aaron W Llewellyn		Theresa M Goodman		Police
Officer Steven J. Gray				

This afternoon at 1429 Hrs PO's Aarron Llewellyn, Rocco Zasa and Steven Gray responded to 1616 Bleecker St in order to effect the arrest of Antwuan Brown B/M [REDACTED] with a signed UCC information for Criminal Contempt 2nd in hand stemming from a domestic incident at that location that took place during the early morning hours. When they attempted to place Brown into custody he resisted arrest by actively pulling away from officers. Officers used soft hand techniques and a take down in order to place Brown in custody. I responded to the scene. There were no injuries to any of the officers. Brown was not injured. Brown made no complaints regarding this incident.

Jul 31, 2018	FD2018-009	Firearm discharge	5	Police
Officer Aaron W Llewellyn		Animal		

On Tuesday, July 31, 2018, I, Sergeant Samuel M. Geddes reported to the Utica Police Department for the 0745 to 1600 hours shift. I was assigned to the Patrol

Division in B-2, in Supervisor Vehicle 40, under the command of Lt. Sean Dougherty.

At approximately 1208 hours, PO A. Llewelyn, Car 56 responded to a call for service relative to an injured deer at the end of the driveway of 1431 South Park Drive. Upon his arrival he located a fawn at the end of the driveway. The asphalt driveway runs slanted to the West to South Park Drive. The injured fawn had multiple obvious injuries and was gasping for air and obviously suffering. As I responded to the scene, I directed PO Llewelyn to euthanize the fawn. Due to the slant of the driveway, PO Llewelyn was able to drag the deer into the into the grassy area adjacent the driveway and dispatch it by firing a single .45 caliber round through the fawn's chest cavity. This caused immediate death to the fawn. Note, it was necessary to both move the deer to the grassy area, as well as the utilization of a .45 caliber round due to the back drop. The spent casing was recovered and placed in evidence. PO Llewelyn was provided with a duty replacement round.

Oct 13, 2018	UOF2018-0154	Use of force	5	Police
Officer Titus P Ciccone				
Officer Aaron W Llewellyn				Police

This afternoon at 1341 Hrs PO's Titus Ciccone & Aaron Llewellyn responded to [REDACTED] Upon arrival officers located the subject in the basement of the residence. The subject is now known to be [REDACTED] In speaking with the officers, they stated that they observed [REDACTED] in a distressed state destroying property. PO Ciccone stated that at one point she picked up an axe and initially refused to drop it. PO Llewellyn said he lunged at her and grabbed the axe from her. When officers went to detain her pursuant to a 9.41 arrest she resisted, a takedown and soft hand techniques were used to place her in handcuffs. I responded to the scene and interviewed [REDACTED] who said she was not injured and did not require medical attention. She began rambling when I asked her what had happened. This was recorded on my BWC. She was transported to St. Elizabeth's hospital.

Dec 27, 2018	UOF2018-0178	Use of force	5	
Investigator William R Williams				Isaiah H. Ruffin
Officer Michael F Cerminaro				Police
Officer Aaron W Llewellyn				Police
Officer Christopher R Manion				Police

On 12/27/18 at around 1103 hours units were sent to the area of Howard Ave. and James St. for black male breaking into cars in the area. The caller was an employee of the Utica City School District and had been following the black male from Watson Williams school where he had seen the male getting into vehicles. The caller followed the male until he stopped on the porch of 1566 Dudley Ave. and officers caught up with him. Officer Llewellyn and Officer Manion immediately recognized this male to be Isaiah Ruffin, who is well known for the behavior reported by the caller. Officer Manion attempted to speak with Ruffin while PO Llewellyn interviewed the caller. Ruffin continued to walk away from PO Manion, ignoring his commands to stay and talk with him. At one point PO Manion reached out and touched Ruffin to stop him from continuing to walk away at which time Ruffin pushed PO Manion away and said "get off of me." At that time PO Manion attempted to take Ruffin into custody and Ruffin continued to pull away. The Warrants Unit then arrived on scene and along with PO Llewellyn assisted in taking Ruffin down to the ground and securing him in handcuffs.

Jul 03, 2019	2019-0030	External/Citizen	5	Police
Officer Aaron W Llewellyn		Ashley A Bailon		
Officer Daniel J Mahaffy				Police

Received message from chiefs officer from Ashley Bailon.

Sgt. Phillips attempted to make contact with Mrs. Bailon with negative results,

I have attempted to speak with Ashley Bailon regarding this matter on the following dates. Ultimately I have been unable to make contact with her.

" 7/11/19 @ 0730 hrs - No answer [REDACTED]
 " 7/17/19 @ 0710 hrs - No answer ([REDACTED])
 " 7/23/19 @0015 hrs - No answer at the door ([REDACTED])
 " 8/2/19 @0735 hrs - No answer, voicemail was left
 " 8/8/19 @ 0700 hrs - No answer at the door, no answer on the phone,
 voicemail left.

Since this investigation was initiated the officer involved (PO Dan Mahaffy) no longer works for this agency.

Report summary: totals by incident type:

Incident type	Received
Anonymous	0
Background Investigation	0
Department Discipline	0
Discretionary arrest	0
Drug test	0
E-File	0
External/Citizen	1
Firearm discharge	1
Foil Request	0
Forced entry	0
Generic incident	0
Integrity test	0
Internal/Department	1
K9 Utilization	0
Notice of Claim	0
Personnel Complaints	0
Show of force	0
Soft Hand/Empty hand	0
Stop	0
UPD Damaged Prop Car/Equip	0
Use of force	3
Vehicle accident	1
Vehicle pursuit	0
Total	7

Printed: Jan 14, 2021 16:28 By: [REDACTED]

Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
20140000000026	2014 DV/AED CPR	In Service	0.00	8.00			Domestic Violence Training- Sgt. A Berger
							AED/CPR- Midstate EMS

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	04/02/2014 08:00	04/02/2014 16:00		
	04/08/2014 08:00	04/08/2014 16:00		
	04/14/2014 08:00	04/14/2014 16:00		
	04/18/2014 08:00	04/18/2014 16:00		

Instructor

Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2014000000051	2014 November inservice	In Service	0.00	8.00			Article 35/Use of Force- Sgt. Brian Bansner Sgt. Christopher Fanigula Infectious Disease- Sgt. Shaffer Supervisor Training-Performance Eval-Sgt. M. Murphy

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	11/04/2014 08:00	11/04/2014 16:00		
	11/06/2014 08:00	11/06/2014 08:00		
	11/12/2014 08:00	11/12/2014 16:00		
	11/14/2014 08:00	11/14/2014 16:00		
	11/20/2014 08:00	11/20/2014 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
20140000000050	2014 October InbService EVOC	In Service	0.00	0.00			Homeland Security

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	09/09/2014 08:00	09/09/2014 16:00		
	09/15/2014 08:00	09/16/2014 16:00		
	09/19/2014 08:00	09/19/2014 16:00		
	09/23/2014 08:00	09/23/2014 16:00		
	09/25/2014 08:00	09/25/2014 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>		
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u> <u>Course 2</u> <u>Comments</u>
2014000000032	2014 TASER in Service	In Service	0.00	8.00	

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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06/05/2014 08:00 06/05/2014 16:00

06/09/2014 08:00 06/09/2014 16:00

06/11/2014 08:00 06/11/2014 16:00

06/13/2014 08:00 06/13/2014 16:00

06/19/2014 08:00 06/19/2014 16:00

06/27/2014 08:00 06/27/2014 16:00

Instructor

<u>Instructor</u>	<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>			<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	<u>Course 2</u>
20160000000007	2015 December In-Service-Active Shooter	In Service	0.00	8.00		

Course Schedule

Schedule			
Class ID	Start Date/Time	End Date/Time	Company
	12/01/2015 08:00	12/01/2015 16:00	
	12/03/2015 08:00	12/03/2015 16:00	
	12/07/2015 08:00	12/07/2015 16:00	
	12/07/2015 08:00	12/07/2015 16:00	
	12/09/2015 08:00	12/09/2015 16:00	
	12/11/2015 08:00	12/11/2015 16:00	
	12/11/2015 08:00	12/11/2015 16:00	
	12/17/2015 08:00	12/17/2015 16:00	
	12/17/2015 08:00	12/17/2015 16:00	
	12/17/2015 08:00	12/17/2015 16:00	

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2015000000001	2015 January Inservice	In Service	0.00	8.00			Domestic Violence/ Workplace Violence Legal Updates

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		01/05/2015 08:00	01/05/2015 16:00		
		01/07/2015 08:00	01/07/2015 16:00		
		01/09/2015 08:00	01/09/2015 16:00		
		01/19/2015 08:00	01/19/2015 16:00		
		01/23/2015 08:00	01/23/2015 16:00		
		01/27/2015 08:00	01/27/2015 16:00		

Instructor

Reserve Date	Course Category	Serial ID	Notes
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Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2016000000005	2015 June Inservice-SPOT	In Service	0.00	8.00			

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		06/26/2015 08:00	06/26/2015 16:00		

Instructor

Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
20160000000003	2015 May Firearms/Article 35 UOF	In Service	0.00	8.00			May Fire arms and Use of Force Article 35

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	05/01/2015 08:00	05/01/2015 16:00		
	05/05/2015 08:00	03/05/2015 16:00		
	05/11/2015 08:00	05/11/2015 16:00		
	05/13/2015 08:00	05/13/2015 16:00		
	05/15/2015 08:00	05/15/2015 16:00		
	05/19/2015 08:00	05/19/2015 16:00		
	05/21/2015 08:00	05/21/2015 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2016000000004	2015 September Body worn camera	In Service	0.00	8.00			

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	09/04/2015 08:00	09/04/2015 16:00		
	09/08/2015 08:00	09/08/2015 16:00		
	09/14/2015 08:00	09/14/2015 16:00		
	09/22/2015 08:00	09/22/2015 16:00		
	09/24/2015 08:00	09/24/2015 16:00		

Instructor

Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
20160000000031	2016 Active Shooter inService	In Service	0.00	8.00			

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		04/05/2016 08:00	04/05/2016 16:00		
		04/07/2016 08:00	04/07/2016 16:00		
		04/11/2016 08:00	04/11/2016 16:00		
		04/13/2016 08:00	04/13/2016 16:00		
		04/15/2016 08:00	04/15/2016 16:00		
		04/21/2016 08:00	04/21/2016 16:00		

Instructor

Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>			<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	
2017000000004	2016 December Inservice	In Service	0.00	8.00	<u>Course 2</u>	Active Shooter Training

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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	12/05/2016 08:00	12/05/2016 16:00		
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	12/05/2016 08:00	12/05/2016 16:00		
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	12/07/2016 08:00	12/07/2016 16:00		
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	12/07/2016 08:00	12/07/2016 16:00		
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	12/09/2016 08:00	12/09/2016 16:00		
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	12/15/2016 08:00	12/15/2016 16:00		
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	12/19/2016 08:00	12/19/2016 16:00		
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Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

[illegible]

Course Schedule

Schedule			
Class ID	Start Date/Time	End Date/Time	Company
	01/06/2016 08:00	01/06/2016 16:00	
	01/06/2016 08:00	01/06/2016 16:00	
	01/06/2016 08:00	01/06/2016 16:00	
	01/08/2016 08:00	01/08/2016 16:00	
	01/08/2016 08:00	01/08/2016 16:00	
	01/08/2016 08:00	01/08/2016 16:00	
	01/08/2016 08:00	01/08/2016 16:00	
	01/14/2016 08:00	01/14/2016 16:00	
	01/14/2016 08:00	01/14/2016 16:00	
	01/14/2016 08:00	01/14/2016 16:00	
	01/14/2016 08:00	01/14/2016 16:00	
	01/18/2016 08:00	01/18/2016 16:00	
	01/18/2016 08:00	01/18/2016 16:00	
	01/18/2016 08:00	01/18/2016 16:00	
	01/18/2016 08:00	01/18/2016 16:00	
	01/22/2016 08:00	01/22/2016 16:00	
	01/22/2016 08:00	01/22/2016 16:00	
	01/22/2016 08:00	01/22/2016 16:00	
	01/28/2016 08:00	01/28/2016 16:00	
	01/28/2016 08:00	01/28/2016 16:00	
	01/28/2016 08:00	01/28/2016 16:00	

Training Course Summary

Print Date: January 11, 2021

<u>Instructor</u>		<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
<u>Course Information</u>					
<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>		
2017000000005	2016 October Inservice	In Service	<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>
			0.00	0.00	<u>Course 2</u>
					<u>Comments</u>
					Use of Force / Legal Updates /
					Infectious Disease / Performance
					Evaluation Training for Supervisors
<u>Course Schedule</u>					
<u>Schedule</u>	<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
		10/04/2016 08:00	10/04/2016 16:00		
		10/14/2016 08:00	10/14/2016 16:00		
		10/18/2016 08:00	10/18/2016 16:00		
		10/20/2016 08:00	10/20/2016 16:00		
		10/24/2016 08:00	10/24/2016 16:00		
		10/28/2016 08:00	10/28/2016 16:00		
<u>Instructor</u>	<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>	

Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2017000000003	2016 September Inservice-DefTac	In Service	0.00	8.00			Verbal Judo, DT, Leads On-Line, Proper Collection City Marhall Supervisor training

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	09/06/2016 08:00	09/06/2016 16:00		
	09/08/2016 08:00	09/08/2016 16:00		
	09/12/2016 08:00	09/12/2016 16:00		
	09/14/2016 08:00	09/14/2016 16:00		
	09/16/2016 08:00	09/16/2016 16:00		
	09/22/2016 08:00	09/22/2016 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Prerequisites		
			Credits	Hours	Course 1
2016000000030	2016 TASER InService	In Service	0.00	8.00	Course 2

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
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02/05/2016 08:00	02/05/2016 16:00			
02/09/2016 08:00	02/09/2016 16:00			
02/15/2016 08:00	02/15/2016 16:00			
02/17/2016 08:00	02/17/2016 16:00			
02/19/2016 08:00	02/19/2016 16:00			
02/25/2016 08:00	02/25/2016 16:00			

Instructor

Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>			<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	
2018000000002	2017 December Inservice/Active Shooter	In Service	0.00	8.00		Training conducted at DHS by Inv Joe Amerosa

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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	12/04/2017 08:00	12/04/2017 16:00		
	12/06/2017 08:00	12/06/2017 16:00		
	12/08/2017 08:00	12/08/2017 16:00		
	12/12/2017 08:00	12/12/2017 16:00		
	12/14/2017 08:00	12/14/2017 16:00		
	12/22/2017 08:00	12/22/2017 16:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Prerequisites			Comments
2017000000043	2017 in-service Taser/Defensive Tactics	In Service	<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	<u>Course 2</u>
			0.00	8.00		
						In-Service instructors Sgt. S Berger, Inv Paladino, Inv Amerosa, Sgt. Wooden, Sgt. Laurey

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
	05/02/2017 08:00	05/02/2017 16:00		
	05/08/2017 08:00	05/08/2017 16:00		
	05/10/2017 08:00	05/10/2017 16:00		
	05/16/2017 08:00	05/16/2017 16:00		
	05/18/2017 08:00	05/18/2017 16:00		
	05/22/2017 08:00	05/22/2017 16:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>			<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	
20170000000006	2017 January Inservice	In Service	0.00	8.00	<u>Course 2</u>	Arrest Diversion/ DV/ NARCO/ Workplace Violence/Sexual Harassment/City Court Procedures

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
	01/04/2017 08:00	01/04/2017 16:00		
	01/06/2017 08:00	01/06/2017 16:00		
	01/10/2017 08:00	01/10/2017 16:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>				<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	<u>Course 2</u>	
2017000000087	2017 September in-service In Service Fall Firearms	In Service	0.00	8.00			in-service Night fire and tactical course.

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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	09/07/2017 14:00	09/07/2017 22:00		
	09/11/2017 14:00	09/11/2017 22:00		
	09/13/2017 14:00	09/13/2017 22:00		
	09/15/2017 14:00	09/15/2017 22:00		
	09/21/2017 14:00	09/21/2017 16:00		
	09/29/2017 14:00	09/29/2017 22:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Prerequisites		Comments
			Credits	Hours	
20180000000036	2018 April In Service/EVOC	In Service	0.00	8.00	EVOC Instructors: Geddes, Berger, Howe, Grande, Acquaviva

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	04/09/2018 08:00	04/09/2018 16:00		
	04/17/2018 08:00	04/17/2018 16:00		
	04/19/2018 08:00	04/19/2018 16:00		
	04/23/2018 08:00	04/23/2018 16:00		
	04/25/2018 08:00	04/25/2018 16:00		
	04/27/2018 08:00	04/27/2018 16:00		

Instructor

Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>			<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	
2019000000005	2018 December Inservice	In Service	0.00	8.00		Active Shooter/ Inv Amerosa

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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12/03/2018 08:00 12/03/2018 16:00

12/07/2018 08:00 12/07/2018 16:00

12/11/2018 08:00 12/11/2018 16:00

12/17/2018 08:00 12/17/2018 16:00

12/19/2018 08:00 12/19/2018 16:00

12/21/2018 08:00 12/21/2018 16:00

Instructor

<u>Instructor</u>	<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>			<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	
2018000000009	2018 February In-Service	In Service	0.00	0.00	<u>Course 2</u>	CPR/Cultural Diversity/Workplace Violence-Sexual Harassment

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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02/02/2018 08:00 02/02/2018 16:00

02/06/2018 08:00 02/06/2018 16:00

02/08/2018 08:00 02/08/2018 16:00

02/12/2018 08:00 02/12/2018 16:00

02/16/2018 08:00 02/16/2018 16:00

02/22/2018 08:00 02/22/2018 16:00

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>			<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	
2018000000001	2018 January Inservice UOF/Person With Diss.	In Service	0.00	8.00	<u>Course 2</u>	Use of Force and Person with disabilities.

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
	01/03/2018 08:00	01/03/2018 16:00		
	01/05/2018 08:00	01/05/2018 16:00		
	01/09/2018 08:00	01/09/2018 16:00		
	01/11/2018 08:00	01/11/2018 16:00		
	01/19/2018 08:00	01/19/2018 16:00		
	01/25/2018 08:00	01/25/2018 16:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>			<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	
2019000000004	2018 September Inservice	In Service	0.00	0.00		Firearms/ Inv Amerosa

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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09/10/2018 08:00 09/10/2018 16:00

09/14/2018 08:00 09/14/2018 16:00

09/18/2018 08:00 09/18/2018 16:00

09/20/2018 08:00 09/20/2018 16:00

09/24/2018 08:00 09/24/2018 16:00

09/28/2018 08:00 09/28/2018 16:00

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Credits</u>	<u>Hours</u>	<u>Prerequisites</u>	<u>Course 1</u>	<u>Course 2</u>	<u>Comments</u>
2019000000007	2019 Feb Inservice	In Service	0.00	8.00				Legal Updates/ Alcohol awareness/ EAP services

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
	02/05/2019 08:00	02/05/2019 16:00		
	02/07/2019 08:00	02/07/2019 16:00		
	02/11/2019 08:00	02/11/2019 16:00		
	02/15/2019 08:00	02/15/2019 16:00		
	02/21/2019 08:00	02/21/2019 16:00		
	02/25/2019 08:00	02/25/2019 16:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
20190000000003	2019 January Inservice	In Service	0.00	8.00			Infectious Disease (Phil Taurisano UFD)/Use of Force(LT Holt)/ DV/Work place violence/Sexual Harassment (PO Jess Dodge)

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	01/08/2019 08:00	01/08/2019 16:00		
	01/10/2019 08:00	01/10/2019 16:00		
	01/14/2019 08:00	01/14/2019 16:00		
	01/16/2019 08:00	01/16/2019 16:00		
	01/18/2019 08:00	01/18/2019 16:00		
	01/24/2019 08:00	01/24/2019 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>			<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	
2019000000031	2019 May Inservice Firearms	In Service	0.00	8.00		Lead Instructor Inv. Amerosa

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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05/06/2019 05:00 05/06/2019 13:00

05/08/2019 05:00 05/08/2019 13:00

05/10/2019 05:00 05/10/2019 13:00

05/16/2019 05:00 05/16/2019 13:00

05/20/2019 05:00 05/20/2019 13:00

05/24/2019 05:00 05/24/2019 13:00

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Prerequisites		Comments
2019000000050	2019 November inservice defensive Tac	In Service	Credits	Hours	Course 1
			0.00	8.00	Course 2
					Defensive tactics/ C/IT/Sexual Harassment / Critical Incident and continuity / Supervisor performance Eval training

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	11/04/2019 08:00	11/04/2019 16:00		
	11/08/2019 08:00	11/08/2019 16:00		
	11/12/2019 08:00	11/12/2019 16:00		
	11/14/2019 08:00	11/14/2019 16:00		
	11/18/2019 08:00	11/18/2019 16:00		
	11/22/2019 08:00	11/22/2019 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Prerequisites			Comments
			Credits	Hours	Course 1	
2019000000032	2019 Patrol Rifle Inservice	In Service	0.00	8.00	Course 2	Inv Amerosa Lead Instructor

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	07/01/2019 08:00	07/01/2019 16:00		
	07/09/2019 08:00	07/09/2019 16:00		
	07/12/2019 08:00	07/12/2019 16:00		
	07/16/2019 08:00	07/16/2019 16:00		
	07/19/2019 08:00	07/19/2019 16:00		
	07/23/2019 08:00	07/23/2019 16:00		
	07/26/2019 08:00	07/26/2019 16:00		
	07/30/2019 08:00	07/30/2019 16:00		

Instructor

Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>			<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	
2020000000002	2020 February in-service	In Service	0.00	8.00	<u>Course 2</u>	CPR recert/ DV/ Workplace Violence/Sexual Harassment

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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02/04/2020 08:00 02/04/2020 16:00

02/10/2020 08:00 02/10/2020 16:00

02/12/2020 08:00 02/12/2020 16:00

02/20/2020 08:00 02/20/2020 16:00

02/24/2020 08:00 02/24/2020 16:00

02/26/2020 08:00 02/26/2020 16:00

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2020000000001	2020 January inservice	In Service	0.00	8.00			Discovery/Bail reform/UOF

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	01/07/2020 08:00	01/07/2020 16:00		
	01/13/2020 08:00	01/13/2020 16:00		
	01/15/2020 08:00	01/15/2020 16:00		
	01/21/2020 08:00	01/21/2020 16:00		
	01/23/2020 08:00	01/23/2020 16:00		
	01/29/2020 08:00	01/29/2020 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
20200000000037	2020 November Inservice DT	In Service	0.00	8.00			

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	11/02/2020 08:00	11/02/2020 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	<u>Course 2</u>	<u>Comments</u>
20140000000039	Aggravated Harrassment Update	In Service	0.00	0.15			August 2014 Roll call training

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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08/04/2014 07:45 08/04/2014 07:59

08/10/2014 08:00 08/10/2014 16:00

08/12/2014 11:45 08/12/2014 11:59

08/13/2014 11:45 08/13/2014 11:59

08/17/2014 11:45 08/17/2014 11:59

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
20150000000023	April 2015 Inservice-CPL Review	In Service	0.00	8.00			Presented by the Oneida County D's Office

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	04/07/2015 08:00	04/07/2015 16:00		
	04/09/2015 08:00	04/09/2015 16:00		
	04/13/2015 08:00	04/13/2015 16:00		
	04/15/2015 08:00	04/15/2015 16:00		
	04/17/2015 08:00	04/17/2015 16:00		
	04/23/2015 08:00	04/23/2015 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	<u>Course 2</u>	<u>Comments</u>
2019000000030	April 2019 Inservice	In Service	0.00	0.00			Cultural Awareness training Refugee center/ DWI SFST refresher

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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04/02/2019 08:00 04/02/2019 16:00

04/04/2019 08:00 04/04/2019 16:00

04/08/2019 08:00 04/08/2019 16:00

04/12/2019 08:00 04/12/2019 16:00

04/18/2019 08:00 04/18/2019 16:00

04/22/2019 08:00 04/22/2019 16:00

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2017000000067	August 2017 Inservice	In Service	0.00	8.00			Legall Updates/Infectious disease/Supervisor training/CPTED/Pursuit Policy

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		08/08/2017 08:00	08/08/2017 16:00		
		08/14/2017 08:00	08/14/2017 16:00		
		08/16/2017 08:00	08/16/2017 16:00		
		08/18/2017 08:00	08/18/2017 16:00		
		08/22/2017 08:00	08/22/2017 16:00		
		08/24/2017 08:00	08/24/2017 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2014000000007	Basic Course for Police Officers	Basic Police Academy	0.00	1000.00			

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		09/09/2013 07:00	02/14/2014 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2014000000006	Basic Photography School	State Sponsored Certifications	0.00	40.00			Instructor- Starr Wooden

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		02/17/2014 08:00	02/21/2014 16:00		

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2017000000021	Feb 2017 Inservice Blue Courage	In Service	0.00	8.00			Blue Courage/Officer Wellness Instructors: Capt Cinque and Sgt. Laurey

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		02/07/2017 08:00	03/07/2017 16:00		
		02/13/2017 08:00	02/13/2017 16:00		
		02/17/2017 08:00	02/17/2017 16:00		
		02/17/2017 08:00	02/17/2017 16:00		
		02/21/2017 08:00	02/21/2017 16:00		
		02/23/2017 08:00	02/23/2017 16:00		

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>				<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	<u>Course 2</u>	
2015000000004	Feb. In-Service 2015	In Service	0.00	8.00			

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
	02/02/2015 08:00	02/02/2015 16:00		
	02/04/2015 08:00	02/04/2015 16:00		
	02/06/2015 08:00	02/06/2015 16:00		
	02/16/2015 08:00	02/16/2015 16:00		
	02/18/2015 08:00	02/18/2015 16:00		
	02/20/2015 08:00	02/20/2015 16:00		

Instructor

<u>Instructor</u>	<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2016000000053	Firearms 2016 in-service	In Service	0.00	8.00			

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
	Firearms	06/06/2016 08:00	06/06/2016 16:00		
	Firearms	06/08/2016 08:00	06/08/2016 16:00		
	Firearms	06/10/2016 08:00	06/10/2016 16:00		
	Firearms	06/14/2016 08:00	06/14/2016 16:00		
	Firearms	06/16/2016 08:00	06/16/2016 16:00		
	Firearms	06/24/2016 08:00	06/24/2016 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2017000000029	Instructor Development Course	State Sponsored Training	80.00	0.00			Location: MVPA

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		03/06/2017 08:00	03/17/2017 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>				<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	<u>Course 2</u>	
2017000000060	June 2017 Firearms w/ Use of Force Review	In Service	0.00	8.00			Inv Amerosa Lead Instructor- Oneida County Range

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
	06/05/2017 08:00	06/05/2017 16:00		
	06/07/2017 08:00	06/07/2017 16:00		
	06/09/2017 08:00	06/09/2017 16:00		
	06/15/2017 08:00	06/15/2017 16:00		
	06/19/2017 08:00	06/19/2017 16:00		
	06/23/2017 08:00	06/23/2017 16:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>			<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	
20180000000045	June 2018 Inservice	In Service	0.00	8.00	<u>Course 2</u>	Infectious Disease, Barricaded Subject, Legal Updates, Raise the age

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
	06/04/2018 08:00	06/04/2018 16:00		
	06/12/2018 08:00	06/12/2018 16:00		
	06/14/2018 08:00	06/14/2018 16:00		
	06/18/2018 08:00	06/18/2018 16:00		
	06/22/2018 08:00	06/22/2018 16:00		

Instructor

<u>Instructor</u>	<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>				
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	<u>Course 2</u>	<u>Comments</u>
2020000000026	June 2020 EVOC	In Service	0.00	8.00			

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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	06/03/2020 08:00	06/03/2020 16:00		
	06/09/2020 08:00	06/09/2020 16:00		
	06/11/2020 08:00	06/11/2020 16:00		
	06/17/2020 08:00	06/17/2020 16:00		
	06/19/2020 08:00	06/19/2020 16:00		
	06/23/2020 08:00	06/23/2020 16:00		
	06/25/2020 08:00	06/25/2020 16:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Prerequisites			Comments
2019000000029	June Inservice 2019	In Service	Credits	Hours	Course 1	Course 2
			0.00	8.00		
						Narcan Refresher training/ Leads
						On-Line training/ Taserrecert

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		06/07/2019 08:00	06/07/2019 16:00		
		06/11/2019 08:00	06/11/2019 16:00		
		06/13/2019 08:00	06/13/2019 16:00		
		06/17/2019 08:00	06/17/2019 16:00		
		06/21/2019 08:00	06/21/2019 16:00		
		06/27/2019 08:00	06/27/2019 16:00		

Instructor

Reserve Date	Course Category	Serial ID	Notes
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Course Information

Course NO	Title	Type	Prerequisites			Comments
2016000000037	Leads On-Line	In Service	Credits	Hours	Course 1	Course 2
			0.00	2.00		

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		05/31/2016 08:00	05/31/2016 10:00		

Instructor

Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	<u>Course 2</u>	<u>Comments</u>
2014000000028	May Firearms 2014	In Service	0.00	8.00			Firearms Staff

Trenton Fish and Game Club

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
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	05/12/2014 08:00	05/12/2014 16:00		
	05/12/2014 08:00	05/12/2014 16:00		
	05/14/2014 08:00	05/14/2014 16:00		
	05/16/2014 08:00	05/16/2014 16:00		
	05/20/2014 08:00	05/20/2014 16:00		
	05/28/2014 08:00	05/28/2014 16:00		
	05/30/2014 08:00	05/30/2014 16:00		
	06/06/2014 08:00	06/06/2014 16:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2014000000027	May Roll call	In Service	0.00	0.25			Aggravated Harrassment declared unconstitutional.

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		05/21/2014 11:45	05/21/2014 11:59		
		05/22/2014 11:45	05/22/2014 11:59		
		05/23/2014 11:45	05/23/2014 11:59		
		05/26/2014 11:45	05/26/2014 11:59		
		05/27/2014 11:45	05/27/2014 11:59		
		05/28/2014 11:45	05/28/2014 11:59		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2016000000021	Mental Health Training	State Sponsored Training	0.00	8.00			

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		04/08/2016 08:00	04/08/2016 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Prerequisites		Comments
			Credits	Hours	

Course 1

Course 2

Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Prerequisites		Comments
			Credits	Hours	
2016000000080	Mobile Field Force	In Service	0.00	8.00	UPD MOBILE FIELD FORCE TRAINING RMS #16-57732 11/30/2016 1100-1500 Hrs.
					TRAINING DAY OUTLINE
					(Roll Call Room) Equipment Issue
					Power Point Presentation Mobile Field Force Operations
					(National Guard Center Burrstone Rd.) Mission Statement
					Equipment Fit Check/Familiarization
					Squad Leader and Squad Assignments
					Team Movement/Military Drill
					Baton Manual of Arms
					Field Force Formations and Arrest Techniques
					Emergency Line
					Line Formation and Line Close Support
					Line relief
					Wedge Formation and Wedge Close Support
					Encirclement Formation and Encirclement Close Support
					Separation Formation
					Cross Bow Line Techniques

Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>		<u>Comments</u>
			<u>Credits</u>	<u>Hours</u>	
			<u>Course 1</u>	<u>Course 2</u>	
					Cross Bow Arrest Techniques
					Cross Bow Rescue Techniques

Officer's Present for Training:

Giruzzi
 Baye
 Tartaglia
 Llewellyn
 Parkosewich
 Fitzgerald
 Hulser
 Murphy
 Piersall
 S. Berger
 Kellogg
 Dongsavangh
 Manion
 Detraglia
 Mahay
 Mahaffy
 Ballo
 Scorzafava
 J. Dodge
 Omeragic
 Geddes
 Amerosa

Respectfully Submitted,
 Inv. Joseph Amerosa

Course Schedule

<u>Schedule</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
<u>Class ID</u>	11/30/2016 11:00	11/30/2016 15:00		

<u>Instructor</u>	<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Prerequisites	Course 1	Course 2	Comments
2014000000055	November 2014 Roll Call training	In Service	0.00	0.25				

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	11/02/2014 11:45	11/02/2014 11:59		
	11/03/2014 11:45	11/03/2014 11:59		
	11/06/2014 11:45	11/06/2014 11:59		
	11/11/2014 11:45	11/11/2014 11:59		
	11/14/2014 11:45	11/14/2014 11:59		
	11/15/2014 11:45	11/15/2014 11:59		
	11/16/2014 11:45	11/16/2014 11:59		
	11/17/2014 11:45	11/17/2014 11:59		
	11/22/2014 11:45	11/22/2014 11:59		
	11/24/2014 11:45	11/24/2014 11:59		
	11/30/2014 11:45	11/30/2014 11:59		
	12/03/2014 11:45	12/03/2014 11:59		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Prerequisites		
			Credits	Hours	Comments
2014000000054	October 2014 roll Call	In Service	0.00	0.25	

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	10/04/2014 11:45	10/04/2014 11:59		
	10/05/2014 11:45	10/05/2014 11:59		
	10/06/2014 11:45	10/06/2014 11:59		
	10/08/2014 11:45	10/08/2014 11:59		
	10/09/2014 11:45	10/09/2014 11:59		
	10/10/2014 11:45	10/10/2014 11:59		
	10/14/2014 11:45	10/14/2014 11:59		
	10/15/2014 11:45	10/15/2014 11:59		
	10/17/2014 11:45	10/17/2014 11:59		
	10/21/2014 11:45	10/21/2014 11:59		
	10/24/2014 11:45	10/24/2014 11:59		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2016000000006	October 2015 in-service	In Service	0.00	8.00			Infectious disease-Dealing with difficult people-K9

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		10/08/2015 08:00	10/08/2015 16:00		
		10/28/2015 08:00	10/28/2015 16:00		
		10/30/2015 08:00	10/30/2015 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2014000000010	Officer Involved DV Training	In Service	0.00	8.00			Appart of Recruit training

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		02/26/2014 08:00	02/26/2014 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Prerequisites			Comments
			Credits	Hours	Course 1	
2018000000021	Patrick Johnson Work Shop	Other Outside agency sponsored	0.00	8.00	Course 2	

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		03/29/2018 08:00	03/29/2018 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Course Information

Course NO	Title	Type	Prerequisites			Comments
			Credits	Hours	Course 1	
2018000000041	Patrol Rifle July 26-31	State Sponsored Certifications	0.00	32.00	Course 2	Inv Amerosa Lead Instructor

Course Schedule

Schedule	Class ID	Start Date/Time	End Date/Time	Company	Course Location
		07/26/2018 08:00	07/31/2018 16:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>		
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u> <u>Course 2</u>
2016000000060	Ptrol rifle training course	In Service	0.00	24.00	

Course Schedule

<u>Schedule</u>	<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
		07/13/2016 08:00	07/15/2016 16:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>		
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u> <u>Course 2</u>
2018000000026	Public Order Basic S hool	Other Outside agency sponsored	0.00	40.00	

Course Schedule

<u>Schedule</u>	<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
		04/30/2018 08:00	05/04/2018 16:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>		
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u> <u>Course 2</u> <u>Comments</u>
2016000000051	Riot Control & Civil Disturbance	In Service	0.00	0.00	

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
Riot Control	05/03/2016 08:00	05/03/2016 16:00		
Riot Control	05/09/2016 08:00	05/09/2016 16:00		
Riot Control	05/11/2016 08:00	05/11/2016 16:00		
Riot Control	05/19/2016 08:00	05/19/2016 16:00		
Riot Control	05/27/2016 08:00	05/27/2016 16:00		

Instructor

<u>Instructor</u>	<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Prerequisites		
			Credits	Hours	Comments
2014000000053	September 2014 roll call	In Service	0.00	0.15	

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
	09/01/2014 11:45	09/01/2014 11:59		
	09/09/2014 11:45	09/09/2014 11:59		
	09/10/2014 11:45	09/10/2014 11:59		
	09/11/2014 11:45	09/11/2014 11:59		
	09/14/2014 11:45	09/14/2014 11:59		
	09/16/2014 11:45	09/16/2014 11:59		
	09/19/2014 11:45	09/19/2014 11:59		
	09/23/2014 11:45	09/23/2014 11:59		
	09/25/2014 11:45	09/25/2014 11:59		

Instructor

Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u> 2017000000031	<u>Title</u> SFST Refresher	<u>Type</u> State Sponsored Training	<u>Credits</u> 4.00	<u>Hours</u> 0.00	<u>Course 1</u>	<u>Course 2</u>	<u>Comments</u> Location: MVPA
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Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u> 03/22/2017 08:00	<u>End Date/Time</u> 03/22/2017 12:00	<u>Company</u>	<u>Course Location</u>
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Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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Training Course Summary

Print Date: January 11, 2021

Course Information

Course NO	Title	Type	Credits	Hours	Course 1	Course 2	Comments
2020000000023	TASER inservice	In Service	0.00	4.00			

Course Schedule

Schedule

Class ID	Start Date/Time	End Date/Time	Company	Course Location
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	04/03/2020 08:00	04/03/2020 12:00		
	04/06/2020 08:00	04/06/2020 12:00		
	04/07/2020 08:00	04/07/2020 12:00		
	04/14/2020 08:00	04/14/2020 12:00		
	04/15/2020 08:00	04/15/2020 12:00		
	04/16/2020 08:00	04/16/2020 12:00		
	04/20/2020 08:00	04/20/2020 12:00		
	04/23/2020 08:00	04/23/2020 12:00		
	04/24/2020 08:00	04/24/2020 12:00		
	04/28/2020 08:00	04/28/2020 12:00		
	04/30/2020 08:00	04/30/2020 12:00		

Instructor

Instructor	Reserve Date	Course Category	Serial ID	Notes
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Training Course Summary

Print Date: January 11, 2021

Course Information

<u>Course NO</u>	<u>Title</u>	<u>Type</u>	<u>Prerequisites</u>				
			<u>Credits</u>	<u>Hours</u>	<u>Course 1</u>	<u>Course 2</u>	<u>Comments</u>
2017000000017	Terrorist Weapons and Tactics	State Sponsored Training	0.00	8.00			

Course Schedule

Schedule

<u>Class ID</u>	<u>Start Date/Time</u>	<u>End Date/Time</u>	<u>Company</u>	<u>Course Location</u>
	02/22/2017 08:00	02/22/2017 16:00		

Instructor

<u>Reserve Date</u>	<u>Course Category</u>	<u>Serial ID</u>	<u>Notes</u>
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