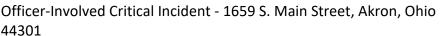


### Ohio Attorney General's Office Bureau of Criminal Investigation

**Investigative Report** 







Investigative Activity: Personnel File Review Involves:

Officer

Authoring Agent: Special Agent Joseph Goudy #83

### Narrative:

On Monday, August 15, 2022, Ohio Bureau of Criminal Investigation (BCI) Special Agent (SA) Cory Monchilov received the personnel file for Officer from the Akron Police Department (APD) and the City of Akron Law Department. SA Joseph Goudy (Goudy) reviewed the personnel file and noted the following:

Officer has been a full-time police officer with the APD since May 29, 2020.

### **Training:**

Officer attended and completed the Ohio Peace Officer Basic Training Program at the Akron Police Academy on May 29, 2020.

### **Firearms Qualification:**

Officer qualified with his Glock 17 duty issued semi-automatic pistol, bearing serial number on May 11, 2021.

Most recently, Officer had "Rifle" training using a Springfield Rifle, bearing serial on February 24, 2022, and "Open" training using his Glock 17 duty weapon on December 22, 2021.

Officer spersonnel file, training records and firearm qualifications are attached to this report. Please refer to the attachments for further details.

### **Attachments:**

Attachment #01: Officer Personnel File

Attachment #02: Officer OPOTA Certificate

Attachment #03: Officer Firearms Qualifications

Attachment #04: Officer Evaluation

Attachment #05: Officer Employee Summary

Attachment #06: Officer OPOTA Certificate and Work History

This document is the property of the Ohio Bureau of Criminal Investigation and is confidential in nature. Neither the document nor its contents are to be disseminated outside your agency.

Page 1 of 1 Supervisor Approval: SAS David Posten #6 9/6/2022 2:57 PM

Contact Information -- Person ID:

Name:

Address:

บร

Home Phone:

Email:

Alternate Phone: Notification

Preference:

Email

Former Last

Name:

Month and Day of Birth:

**Personal Information** 

Can you, after employment, submit proof of your legal right to work in the United States?

Yes

What is your highest level of education?

Associate's Degree

**Preferences** 

Types of positions you will accept:

Regular Full Time

Types of work you will accept: Types of shifts you will accept:

Day

Objective

Education

College

Thomas University

[Unspecified Start] - 5/2019

Thomasville, Georgia

Did you graduate: No

College Major/Minor: Criminal Justice

Degree Received: Bachelor's

College

Thomas University Thomasville

6/2015 - 5/2018

Thomasville, Georgia

Did you graduate: Yes

College Major/Minor: criminal justice

Degree Received: Associate's

**Work Experience** 

K-9 Officer

6/2015 - Present

Hours worked per week: 40 Monthly Salary: \$2,400.00

# of Employees Supervised: 0 May we contact this employer?

Thomasville Police Department

Thomasville, Georgia

### **Duties**

Duties, Accomplishments and Related Skills:

During nine weeks of training at the Georgia Police Academy in Tifton, recognized as the Top Marksman, and was given the Class Flag as I was honored as Best Overall by staff instructors

In 2016 and 2017, I was invited to an awards ceremony to receive regional recognition by MADD (Mothers Against Drunk Driving) and the state for getting drunk drivers off the street

Both K-9's are USPCA (United States Police Canine Association) certified

In 2017, I received a certification in Crisis Intervention through NAMI (National Alliance on Mental Illness).

In 2018, I was awarded the Drug Buster award with over thirty drug arrests for the year

In 2018, I មន្តេចមនុស្សាន្ត្រាស់ Regional Trials. My ដើម្បីដឹង and I received the Million awards; Region 26 ប្រជាពី awards; Region 26 ប្បាក់ awards; Region 26 ប្រជាពី awards region

While employed with the Thomasville Police Department I have continuously volunteered my time to participate in off duty events for our community. I have completed twenty K-9 Demonstrations for schools, churches and business leaders. I have attended several community-organized events, which allows officers and the community to interact and build trust. I have also volunteered with local school age children during Christmas time to provide them with gifts to open on Christmas day. This particular event is called Shop with a Cop and is very special to the children and officers who participate

### Reason for Leaving

Moving to Ohio to be closer to my family.

SSgt

9/2008 - 9/2014

United States Air Force Moody AFB. Georgia

Hours worked per week: 40 Monthly Salary: \$2,400.00 # of Employees Supervised: 10

Name of Supervisor: Cory Hebb - TSGT May we contact this employer? Yes

### **Duties**

Hours per week: 40 Security Forces

Duties, Accomplishments and Related Skills:

- \* In 2008, I graduated 1st in my class of over 50 Airman for Security Forces technical training, I earned this achievement based on overall performance with weapons, shooting, and leadership \* In 2011, I was awarded Airman of the Quarter for Moody Air Force Base over 100 other eligible participants. I earned this award due to testing in top 91% on my job knowledge test, completing basic Airborne School and CPEC (Close Precision Engagement Course) during that quarter \* My supervisors put me in for Senior Airman Below the Zone, which is a promotion to E-4 six months early. In 2011, I was in competition with 20 other E-3's for the honor and was selected \* After being promoted to E-4, I became a Fire Team Leader and I supervised four personnel on a seventeen-man squad
- \* In 2011-2012 I deployed to Balad, Iraq. I served on a tactical security element for OSI (Office of Special Investigations). I was selected and placed on a seventeen-member squad for this assignment. After completing a difficult 45-day training course we were assigned to Special Investigations in Balad. We were tasked with providing security for special investigators while conducting missions off base
- \* In 2012, I earned the title of Jumpmaster. I completed 42 static line jumps from aircraft. While serving as jumpmaster, there were no accidents or injuries
- \* In 2012, I completed a two-week basic instructor course at Shepard AFB in Wichita Falls, TX. After this course, I was assigned to the 820th Combat Operations Squadron as a training instructor responsible for training over 600 Airman. After completing my assignment as a training instructor I was transferred to the 822nd base Defense Squadron as a assistant commander on my squad
- \* In 2013, I deployed to Bagram, Afghanistan as part of the base defense. I completed several missions outside the base which consisted of locating rocket launch sites and helping the local
- rmssions outside the base which consisted or locating rocket faunch sites and helping the local communities. I was part of a seventeen-man squad and was second in command. I was the lead truck in a four-vehicle security element. I was responsible for navigation.

  \* While conducting an outside the wire might see all days in the hospital on Bagram. For my actions while deployed, I earned the Air force command dation Medal, Combat Action Medal and Purple Heart

  17871480914640999911 wrote performance and the day of the was struck by a command with the conducting an outside the wire might be all days in the hospital on Bagram. For my actions while deployed, I earned the Air force to the day of the conduction o

**6 Unperpet year Structure** work Donald Rice, Director

Reason	for	Leavir	١g
Contract			_

### Certificates and Licenses

### Skills

Office Skills

Typing:

Data Entry:

### **Additional Information**

Honors & Awards

In 2011, I was awarded Airman of the Quarter for Moody Air Force Base over 100 other eligible participants. I earned this award due to testing in top 91% on my job knowledge test, completing basic Airborne School and CPEC (Close Precision Engagement Course) during that quarter

### Honors & Awards

While conducting an outside the wire mission on May 12, 2013 my vehicle was struck by a command wire IED. I suffered injuries and spent several days in the hospital on Bagram. For my actions while deployed, I earned the Air Force Commendation Medal, Combat Action Medal and Purple Heart

### Honors & Awards

During nine weeks of training at the Georgia Police Academy in Tifton, recognized as the Top Marksman, and was given the Class Flag as I was honored as Best Overall by staff instructors

### Honors & Awards

In 2016 and 2017, I was invited to an awards ceremony to receive regional recognition by MADD (Mothers Against Drunk Driving) and the state for getting drunk drivers off the street

### Honors & Awards

In 2018, I was awarded the Drug Buster award with over thirty drug arrests for the year

### Honors & Awards

In 2018, I was awarded several awards for competing in Region 26 USPCA (United Stated Police Canine Association) Regional Trials. My canine and I received the following awards: Region 26 2018 "Top Dog" and Overall 1st Place out of a 30 K-9's in that region. Region 26 2018 Rookie K-9 Handler award. Region 26 2018 Overall 1st place in Suspect Apprehension out of 30 K-9's in that region

### References

**Professional** 

MSGT

### Professional

Narcotis

### Resume

**Text Resume** 

**Attachments** 

A	tta	chment	File Name		File Type	Created By
F&	04Z-S	k noisateininibA PEZZALIMENTOCX VE(DEE) :snort TE(OEE) :xsq EN (OEE) :xsq	Dissivite Control of the control of	Strict Division 1517	(K <del>E</del> zmul	Julia, Lottu Inoistvić Instrnyolguri Job Seeklabte) :smorld 9650,675 (066) :small Jop Seekelsol moog
Ur	offic	cial Transcripts	Ur Transcripts	nofficial	Transcripts	Julia Toth
		is Univ Official ripts	Of	ficial Transcripts	Transcripts	Julia Toth
Co	ру с	of Degree	Degree		Copy of Degree	Katherine Archual
Re	side	ncy Form 2019			Other	Penny Scholl
Ag	enc	y-Wide Questio	n <b>s</b>			
1.		of the Akron City shall have twent provided the can City of Akron con examination and	ligible for Residency Pro Charter. A candidate y percent (20%) of suc- ididate has been a resi- ntinuously for at least of remains a resident cit e selection process. Do	who obtains a pa th grade added to dent citizen withi one year immedia izen of the City o	ssing grade on a o the examinatio n the corporate I ately prior to the f Akron througho	n examination, n score imits of the date of out the
2.	Q:	How many mont	hs have you continuou:	sly lived at your	present address?	
	A:	24				
3.	Q: A:	resided at each a	where you have resided address. Clinton Ohio 44216 05 Valdosta, Georgia Thomasville, Georgia homasville, Georgia 31	/30/1990-09/01/ 31602 01/01/200 31792 10/01/20	/2008 09-09/02/2014 14-04/01/2017	the dates you
4.	Q: A:	Indicate an alter	nate contact person an	d telephone num	ber.	
5.	Q:	Have you ever be	een employed by the C	ity of Akron?		
	A:	No				
-	_					
6.	•	•	a permanent City of A	kron employee i	n the classified s	ervice?
	A:	INO				
7.	Q: A:	If you were previ and dates of emp	iously employed by the ployment.	City of Akron, p	lease indicate po	sitions held
					······································	
8.	Q: A:	•	een terminated flom a	र्गित्रांड्वान्नुह्यात्र्		
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		If you have been pf <b>Herimoutlo</b> n an		actincy, pleas	se indicate the er	nployer, date
wo	t Ko	Runicipa 3 AgiH ,2 991	POLE	TWY		Donald Rice, L Department of Huma

2022-09-06 Officer File Review - Bureau of Criminal Investigation Main Office 02/22/2023

1		Q: How did you hear about the position? Check all that apply.
		A: City of Akron Website
S	qui	plemental Questions
1		Q: Did you graduate from an accredited high school or do you have a GED certificate? A: Yes
2.		2: Applicants must be between the ages of 21 and 40 at the time of the written examination. What is your full date of birth? (MM/DD/YYYY)
3.		: Will you be between the ages of 21 and 40 at the time of the examination? : Yes
4.	Q	: Select the category that defines your date of birth.
	Α	: Born between May 10, 1978 and May 12, 1998.
5.		: Do you possess a valid driver's license? Yes
<b>;</b> .		Is your driver's license currently suspended? No
'.		For the purpose of verifying my eligibility for positions requiring a valid driver's license, I authorize the City of Akron to obtain a consumer report from OPENonline to investigate my driving history for traffic violations and suspensions. I understand that I have a right to request disclosure of this consumer report under the Fair Credit Reporting Act. To print out a summary of your rights under the Fair Credit Reporting Act go to: http://www.akronohio.gov/person.html. Copies of the summary are also available from the City of Akron Department of Human Resources at 330-375-2720. I consent
•		In order to be awarded additional education credit for course work completed at an accredited college or university, you must submit a copy of your official transcripts or degree. Will you be submitting or attaching your college transcripts or copy of your degree? If yes, you must scan and attach a copy of your official transcripts or degree, mail or hand deliver them to Room 102, Municipal Bldg., 166 S. High St, or email them to krininger@akronohio.gov.  Yes
	Q: A:	
	Q: . A:	Are you prohibited by law from acquiring, having, carrying, or using firearms?
	Q: / Q: / (	Are you currently certified or in the process of becoming certified by the Ohio Peace Officer Training Commission (OPOTC)?

:

Phone: (330) 375\$304

noizivi(1 O33\gminis1T Administration and

Employee Benefits Division

Room 102

Fax: (330) 375-2659 Phone: (330) 375-2720

Employment Division

12. Q: If you have received OPOTC certification, what are the dates of your most recent Coughhissign? Room 703 Pax: (330) 375-229 Phone: (330) 375-2700 Room 703

Phone: (330) 375-2710 Fax: (330) 375-2299

Employee Records Division

DANIEL HORRIGAN, MAYOR

Department of Human Resources Donald Rice, Director

Akron, OH 44308-1421 166 S. High St Room 103



### **HIRE/PERSONNEL ACTION FORM**

	E	mployee Information
Employee:		
Address 1:		
Address 2:		
City:	Thomasville	State: Georgia Zip:
Phone:		
		Hire Information
Person ID:		
Job Class #:	510S	Job Class: Police Officer
Hire Date:	12/09/19	Pay Rate: \$0.00
Department:	Public Safety Departme	nt
Division:	Police Uniformed Divis	ion - 751
Hire Req. #:	2018-00233	Job Term: Permanent
Desired start da work until final	ate as listed above is not g I approval is received fro	guaranteed. Employee must not m Human Resources.:
NOTE: For Pro he effective dat	omotion, Transfer, or Dei te:	notion, the Hire Date above is This is a Hire
Enter the direct	supervisor of this emplo	yee as of the start date:: Jerry Forney
Employee ID:		
ay Grade and	Step:	80-3
ppointment A	ctions:	Employment
hange Actions	:	
ppointment Co	ode:	Permanent Full-Time Probation New
tatus Code:		Active
ist Code:		Open
osition Number	r <b>:</b>	00001575

### SSN (DEPARTMENT OF HR USE ONLY):

### Marital Status (DEPARTMENT OF HR USE ONLY):

Comments:

10000-130100

	Approvers	
Division Manager	BALL II, KENNETH	09/30/19 03:49 PM
Mayor	Akron, Mayor	09/30/19 04:42 PM

Printed on December 05, 2019



### City of Akron Setup & Change Personal Information

### Employee

As an Equal Employment Opportunity employer, the City of Akron follows all federal, state, and local laws, rules, and regulations that pertain to Equal Employment Opportunity. The information obtained will be kept confidential except as otherwise provided by law and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the state or federal government for civil rights enforcement. When used in a report to the state or federal government, the data will not identify any specific individual. Please complete entire form.

Employee ID Number	Social Security Number
First Name	Middle
Last Name	Date of Birth
Gender  ● Male Female	'If you have had a name change please submit copy of your social security card with this form.
Street Address	City Thomasville
State GA	Zip Code
E-mail Address	Cell Phone Number
Home Phone Number	Please check your preferred method of contact below:  • Phone  Mail  E-mail

a

### Marital Status

Single

 Married Separated Divorced Widowed

Thomasville

### Highest Education Level completed

Less Than HS Graduate HS Graduate or Equivalent Some College Technical School 2 Year College Degree Bachelor's Level Degree

 Some Graduate School Master's Level Degree Doctorate (Academic) Doctorate (Professional) Post Doctorate

### In case of emergency please contact:

First Name Last Name

Phone Number Street Address

City State

Zip Code Relationship to Employee:

I hereby certify that every statement I have made on this Setup & Change Personal Information form is true and complete. I understand that any false or incomplete answer may be grounds for dismissal.

GA

Signature Date 09/26/2019

Please submit completed original form to Department of Human Resources - Employee Records Office Revised 2/2017

From:	Rininger, Kristine
Sent:	Thursday, September 26, 2019 8:48 AM
To:	THE COUNTY SEPTEMBER 20, 1015 0.40 AN
Subject:	Akron Police Processing for employment
Attachments:	summa safety forces packet - complete.pdf
	conditional job offer of employment with the City of Akron.
information for you to so Resources office prior to contact me at 330-375-2.	for Police Officer is completion of a medical and psychological evaluation. Below is the contact hedule both of these appointments. You will need to come to the Department of Human your appointments to sign the required releases for your psychological evaluation. You can 720 to make arrangements once you know when you will be in Akron. You will also need to rms and take the completed forms to your medical evaluation.
cuyahoga Falls, Ohto 442 chedule your medical ever four will need to fast a samination: Photo ID; in	will be conducted at Summa Center for Corporate Health, 1860 State Road, Suite C,  23. Please call Melinda Davis at 330-940-5728 or email her at <a href="mailto:davismd@summahealth.org">davismd@summahealth.org</a> to aluation and cardiovascular stress test.  3 — 10 hours prior to your medical exam. Items you will need to take with you to namunization record including date of last tetanus shot; corrective lenses (if applicable). If you g case and solution with you. The vision test will be conducted with and without corrective
The two-part psychologic	cal evaluation consisting of a written assessment and interview will be conducted at:
	Summit Psychological
	37 N. Broadway Street, Suite 200 Akron, Ohio
Please call Sarah Dhinojw our appointment. Free p	ala at 234-571-9110 ext 112 to schedule your appointment. You should allow three hours for the parking is available in the paved, black-top parking lot on the north side of the building.
ould go into the system a	I paperwork, you will receive a "do not reply" email that will prompt you to set up a password ork, etc. through our Neogov Onboarding system. Once you have set up your password, you nd complete all assigned forms, tasks, etc.
nk you.	

1

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Kristine Rininger
The City of Akron
Department of Human Resources
330-375-2720

### ACKNOWLEDGMENT OF CONDITIONAL JOB OFFER FOR THE POSITION OF POLICE OFFICER

### Do not resign from your current job in anticipation of employment

I fully understand and acknowledge that I have received a CONDITIONAL JOB OFFER for the position of Police Officer and that the offer is conditioned on satisfactory completion of the below listed conditions. The standards for each must be met as established by the City of Akron:

- 1. I must meet and maintain the requirements of a background investigation, including a criminal background check;
- 2. Physical fitness testing;
- 3. A complete medical examination;
- 4. A psychological evaluation;
- 5. Drug screening;
- 6. That a budgeted position for Police Officer is available;
- 7. That funding is dedicated to fill the vacant position at the time I am hired;
- 8. If conditions one through seven are met, I understand that I must also become certified through the Ohio Peace Officer Training Commission ("OPOTC"). If required by the City, I will attend and must successfully complete a Peace Officer Basic Training Academy, which academy may be selected by the City of Akron. OPOTA curriculum and training requirements are subject to change; however it usually includes passing physical fitness requirements, skill assessments and a written examination, and completing a required amount of hours of training. If I am currently certified by OPOTC, I must maintain my certification. I also understand that I must attend and successfully complete any additional training that may be required by the City of Akron.

OPOTA training and certification process must be successfully completed by or before June 20th 2020.

I understand that this offer is conditional subject to all the requirements listed above being met. This offer may be withdrawn if any of the conditions listed above are not satisfied or if I am or become unable to perform the essential job functions for the position of Police Officer with or without reasonable accommodation. I understand that I must be able to meet the minimum qualifications for the position at the time of hiring, which includes, but is not limited to, a valid Ohio driver's license, no felony convictions, and no restrictions on my ability to carry and use a firearm.

I understand that this is not a guarantee of employment. I understand that if I am swom in to the position of Police Officer, I will be subject to a probationary period as required by the City of Akron and subject to all rules, policies and procedures of the City of Akron related to the probationary period and otherwise.

I further understand that my background investigation is a continuous process throughout my training, probationary period and employment. If any information not previously disclosed is revealed or discovered which would have caused my rejection or disqualification from employment by the City of Akron, in the City's sole discretion, my conditional job offer will immediately be rescinded or my employment will be terminated.

I agree to execute a separate agreement which demonstrates that I agree to reimburse the City of Akron for the cost of my training under certain circumstances detailed therein and a separate agreement regarding the property and equipment issued to me by the City of Akron.

I HAVE READ AND UNDERSTAND THE TERMS OF THIS CONDITIONAL OFFER AND AGREE TO ABIDE BY THESE TERMS. I UNDERSTAND AND AFFIRM THAT IF THE CONDITIONS OF THIS JOB OFFER ARE MET, MY APPOINTMENT WILL BE TO PROBATIONARY EMPLOYMENT AND I UNDERSTAND THAT I MUST SUCCESSFULLY COMPLETE A PROBATIONARY PERIOD UPON BEING SWORN AS A POLICE OFFICER.

Applicant (Print)
Address
Thomsville, Georgic
Date: 9-25-19
1

City of Akron Human Resources Department January 1999

Revised January 2007, January 2012, July 2013, October 2015, May 2016, October 2016, May 2017, June 2017, August 2017, December 2017, January 2018, September 2019

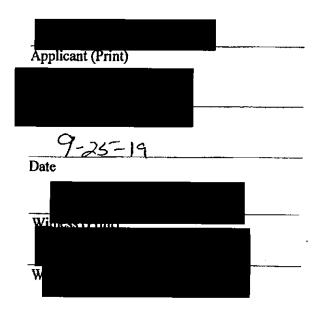
Page 2 of 2

### **AGREEMENT**

I, \_\_\_\_\_, am scheduled to be enrolled in an Ohio Peace Officer training academy starting Nov. / Dec. 2019 to receive training prior to my appointment as a Police Officer for the City of Akron.

In the event that I voluntarily resign from the Police Training Academy prior to graduation, I hereby agree to reimburse the City of Akron a pro rata share of the total cost of my training and equipment within twenty-four (24) months of quitting the academy. In the event I do not complete the Academy, do not pass the required OPOTA certification examination at the end of the Academy or am not appointed to the position of police officer with the City of Akron for any reason other than lack of funding, I hereby agree to reimburse the City of Akron the cost of my training and equipment within twenty-four (24) months of the end of my training at the Academy. In the event that I resign from the Akron Police Department within two (2) years from the date I graduate from the Police Training Academy, I hereby agree to reimburse the City of Akron the cost of my training and equipment within twenty-four (24) months of this resignation. This amount due is in consideration of the benefits of the police training received by me to become a City of Akron Police Officer as well as the costs incurred by the City of Akron in paying for such training.

I fully understand the consequences of signing this agreement and voluntarily agree to its terms. I fully understand this is a legal debt of mine and collectible through whatever legal means the City of Akron may employ.







Civilian Identification Office 877-224-0043 Fax 740-845-2633

P.O. Box 365 London, OH 43140 www.OhioAttorneyGeneral.gov

2019 MAY 20 PH 3: 02 May 14, 2019

CITY OF AKRON HR ATTN: KRIS RININGER 166 S HIGH STREET, ROOM 102 AKRON OH 44308





Superintendent
Ohio Bureau of Criminal Investigation

Pursuant to Ohio Revised Code section 109.57(E)(2), BCI is authorized to provide only information relating to criminal convictions and guilty pleas. BCI is also only permitted to provide information regarding juvenile adjudications if the adjudication meets specific criteria listed in Ohio Revised Code section 109.57(E)(2) & (3).



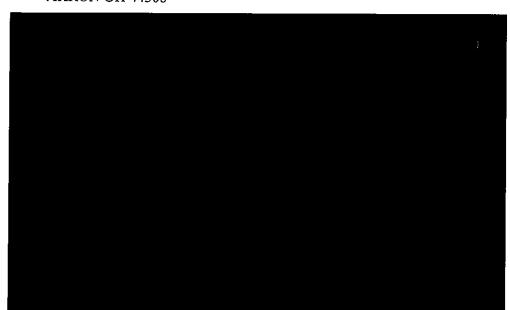
CITY OF AKROH APPLICATIONS/TESTING 2019 MAY 20 PM 3: 02

Civilian Identification Office 877-224-0043
Fax 740-845-2633

P.O. Box 365 London, OH 43140 www.OhioAttorneyGeneral.gov

May 14, 2019

CITY OF AKRON HR ATTN: KRIS RININGER 166 S HIGH STREET, ROOM 102 AKRON OH 44308



Superintendent
Ohio Bureau of Criminal Investigation

Pursuant to Ohio Revised Code section 109.57(E)(2), BCI is authorized to provide only information relating to criminal convictions and guilty pleas. BCI is also only permitted to provide information regarding juvenile adjudications if the adjudication meets specific criteria listed in Ohio Revised Code section 109.57(E)(2) & (3).



Ohio Department of Public Safety - Government Acces	- Government Access
---	---------------------

Last Name:

### Driver Abstract

This Ohio driver abstract spans the previous three-year period.

Your License Status as of 12/2/2019: Valid

**Endorsements: None** 

CDL Med Cert Not Certified

Restrictions: A: None



# CITY OF AKRON SETUP & CHANGE PERSONAL INFORMATION

CITY OF AKRON EMPLOYEE BENEFITS

2019 DEC 13 PH 2: 24

As an Equal Employment Opportunity employer, the City of Akron follows all federal, state, and local laws, rules, and regulations that pertain to Equal Employment Opportunity. The information obtained will be kept confidential except as otherwise provided by law and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the state or federal government for civil rights enforcement. When used in a report to the state or federal government, the data will not identify any specific individual.

Please complete entire form	is government, the data will not identify any specific individual.
Employee ID Number:	Social Security Number:
First Name:	Middle Name: Last Name:
*If you have had a name change p copy of your social security card w	
ontact Information	
Street Address:	
City: <u>Clinton</u>	State: OHIO Zip Code:
E-mail address:	
Cell Phone Number:	Please check your preferred method of contact below:
Home Phone Number:	□Phone □Mail ☑E-mail
ersonal Information	
Marital Status:	Highest Education Level completed:
Single Divorced Married Widowed Separated	☐ Less than HS graduate       ☐ 2-year College Degree       ☐ Doctorate (Academic)         ☐ HS graduate or equivalent       ☒ Bachelor's Level Degree       ☐ Doctorate (Professional)         ☐ Some College       ☐ Some Graduate School       ☐ Post-Doctorate
	☐ Technical School ☐ Master's Level Degree
case of emergency please co	itact:
First Name:	Last Name: Phone Number:
Street Address:	
City: Clinton	State: CHIO Zip Code:
Relationship to Employee:	
ereby certify that every statemenderstand that every statemenders and the statement of the	ent I have made on this Setup & Change Personal Information form is true and complete.
Signature	Date: <u>D-11-19</u>

Personnel Department: Training/EEO Division: Online Training and Review: Acknowled... Page 1 of 1

print this page close this window to return

### Acknowledgement of SEXUAL HARASSMENT AWARENESS (SHA) TRAINING Computer Based Training

l acknowledge that on <u>Friday, December 20, 2019</u>, I completed the City's SEXUAL HARASSMENT AWARENESS (SHA) TRAINING Computer Based Training.

1.5

t y see a se
Please print your name
Title
Police Department  Department/Division
Department/Division
12-31-19
Date

3030 1VH 55 6H 3: 5#

Personnel Department: Training/EEO Division: Online Training and Review: Evaluation ... Page 1 of 1

print this page close this window to return

### TRAINING EVALUATION SEXUAL HARASSMENT AWARENESS (SHA) TRAINING

Your assessment of this program can help us improve future computer-based training courses. Please express your candid opinions by rating each item with the answer that best describes your reaction. Upon completion, return evaluation to Myra Snipes, Training/EEO Division, Suite 100 - CitiCenter.

The computer based Training course I am evaluating is
SEXUAL HARASSMENT AWARENESS (SHA) TRAINING
2. Before taking this computer-based training (CDT) assures
<ol> <li>Before taking this computer-based training (CBT) course, your knowledge and understanding of the subject</li> </ol>
[√] Above average
[ ] Average
Below average
[ ] Unsure
3. Approximately, how long did it take you to complete the CBT course?
Less than 30 minutes
[ ] 30 - 55 minutes
[ ] 1 - 2 hours
[ ] 3 - 4 hours
4. The quality of sound is
[ /] Excellent
[ ] Good
[ ] Average
[ ] Below average
5. After taking this computer-based training, your knowledge and understanding of the subject is
[V] Above average
[ ] Average
Below average
[ ] Unsure
6. The computer-based training course is
! JVery user-friendly
[ ✓ Moderately user-friendly
[ ] Not very user-friendly
[ ] No opinion
Additional Comments:



### Fraternal Order of Police, Akron Lodge #7

217 S. High Street, Suite 404 Akron, Ohio 44308

Form

### Election to Enroll in Employer Deductions

agree to have	withheld from my weekly pay be	I hereby "Voluntarily nefits by the City of Akron.
Printed Name	,.	
Payroll ID Number		

Dues Form 8/18



### **CITY OF AKRON SETUP & CHANGE PERSONAL INFORMATION**



As an Equal Employment Opportunity employer, the City of Akron follows all federal, state, and local laws, rules, and regulations that pertain to Equal Employment Opportunity. The Information obtained will be kept confidential except as otherwise provided by law and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the state or federal government for civil rights enforcement. When used in a report to the state or federal government, the data will not identify any specific individual.

Please complete entire for	133		·			
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*If you have had a name chang copy of your social security car		Date of Birt	<u>-</u>		Last Name Gender:	e:
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City: Union Town		State:	ملائه		Zip Code;	
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Cell Phone Number:				Please check y	our preferred	method of contact below:
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Revised 2/2017



### **CITY OF AKRON SETUP & CHANGE PERSONAL INFORMATION**

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Please complete entire form		y any specific mulaiduas	<del></del>
Employee ID Number:	Social Securi	lty Number:	
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"if you have had a name change copy of your social security card	please submit a with this form. Date of Birth:	Gender: Stall	
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Signature		Date:	212920
Please submit o	ompleted original form to Department of Human	Resources - Employee Records Offic-	Revised 2/

Revised 2/2017

Form 190P Inter-Departmental Use

### CITY OF AKRON, OHIO

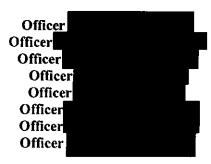
**DEPARTMENT** 

POLICE DIVISION

CHIEF'S DIRECTIVE 2022-CD-67 June 27, 2022

### DIRECTIVE

Effective Monday, June 27, 2022, the following officers are placed on Administrative Leave with pay per procedure following a critical incident:



Stephen L. Mylett Chief Of Police

Stephen J. myllt



### Bureau Of Criminal Investigations Ohio Law Enforcement Gateway Agency/User Agreement

from unauthorized use and to ensure that the system is functioning properly, individuals using this computer system are subject to having all of their activities monitored, recorded, and audited. Anyone using this system expressly consents to such monitoring and is advised that any evidence of possible abuse or criminal activity will be provided to appropriate officials. Unauthorized attempts to upload or change information, or otherwise cause damage to this service, are strictly prohibited. I acknowledge that any unauthorized access or misuse of the law enforcement information or data on this site is prohibited by Revised Code section 2913.04, and constitutes a fifth degree felony. I further acknowledge that any failure to abide by the conditions and restrictions in the user agreement and in the OHLEG Rules and Regulations will result in a loss of my privileges of access to this tool. The law enforcement data maintained by BCI on the OHLEG site is provided at and subject to the discretion of BCI. BCIs grant of access to OHLEG confers upon me no process or other rights in maintaining such access. I ACKNOWLEDGE THAT I HAVE READ THE CURRENT VERSION OF THE OHLEG RULES AND REGULATIONS AND WATCHED THE REQUIRED SECURITY TRAINING VIDEO, AVAILABLE ON THE OHLEG SITE.

Printed Name:	Date: 4/29/2020
Title: Patrol	
Signature	OAI/ORI #:

Ohio Attorney General
OHLEG Agency/User Agreement



# Bureau Of Criminal Investigations Ohio Law Enforcement Gateway Agency/User Agreement

**User Acknowledgment** 

I acknowledge that I am responsible for reading and understanding the OHLEG Security Policies. I acknowledge and agree that I will utilize this information exclusively for the administration of criminal justice for the official purposes of my agency. Access to OHLEG is a privilege subject to termination. Data accessed through OHLEG is continuously subject to limitations on use and dissemination and is not to be sold, transmitted, or disseminated to any unauthorized person. To protect the system from unauthorized use and to ensure that the system is functioning properly, individuals using this computer system are subject to having all of their activities monitored, recorded, and audited. Anyone using this system expressly consents to such monitoring and is advised that any evidence of possible abuse or criminal activity will be provided to appropriate officials. Unauthorized attempts to upload or change information, or otherwise cause damage to this service, are strictly prohibited. I acknowledge that any unauthorized access or misuse of the law enforcement information or data on this site is prohibited by Revised Code section 2913.04, and constitutes a fifth degree felony. I further acknowledge that any failure to abide by the conditions and restrictions in the user agreement and in the OHLEG Rules and Regulations will result in a loss of my privileges of access to this tool. The law enforcement data maintained by BCI on the OHLEG site is provided at and subject to the discretion of BCI. BCIs grant of access to OHLEG confers upon me no process or other rights in maintaining such access. I ACKNOWLEDGE THAT I HAVE READ THE CURRENT VERSION OF THE OHLEG RULES AND REGULATIONS AND WATCHED THE REQUIRED SECURITY TRAINING VIDEO, AVAILABLE ON THE OHLEG SITE.

Printed Name:	Date: 4/29/2020	
Signatur	OAI/ORI #:_	
Agency Name:_	Akon Police Department	

Agency Acknowledgment

I acknowledge that I am responsible for reading and understanding the OHLEG Security Policies. I also state that I am responsible for the users that are assigned to my charge and will adhere to these directives and that failure to do so may constitute a security violation resulting in denial of access to BCI/OHLEG information resources as well as other products and services provided by the AGO. I agree to cooperate with any OHLEG investigation and provide whatever information may be necessary for an OHLEG administrative review. I acknowledge and agree that I will utilize this information exclusively for the administration of criminal justice for the official purposes of my agency. Access to OHLEG is a privilege subject to termination. Data accessed through OHLEG is continuously subject to limitations on use and dissemination and is not to be sold, transmitted, or disseminated to any unauthorized person. To protect the system

Ohio Attorney General
OHLEG Agency/User Agreement

Page 1 3/1/2018



DO SOLEMNLY PLEDGE

UPON MY HONOR THAT I WILL UPHOLD AND SUPPORT THE CONSTITUTION OF THE UNITED STATES AND THE LAWS THEREOF, THE CONSTITUTION OF THE STATE OF OHIO AND THE LAWS THEREOF, THE CHARTER AND ORDINANCES OF THE CITY OF AKRON AND THE RULES AND REGULATIONS OF THE AKRON POLICE DEPARTMENT, AND THAT I WILL FAITHFULLY, HONESTLY AND IMPARTIALLY DISCHARGE AND PERFORM THE DUTIES OF A POLICE OFFICER TO THE BEST OF MY ABILITY.

I DO SO PLEDGE.



AFFIRMED BEFORE ME AND SUBSCRIBED IN MY PRESENCE







Ohio Peace Officer Training Commission Office 800-346-7682 Fax 740-845-2675

### NOTICE OF PEACE OFFICER APPOINTMENT

Check	Boy H.	ПС	Correctly	on to	Record	r
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□ Name Change

- 1. Within ten days of the appointment or status change, or promotion to Chief, submit one copy of this form either by email ((SF400@chicattorneygeneral.gov), fax or mail.

  Type or print legibly and complete all blanks. Officer and Agency email addresses need to be entered to receive training determinations. Submit pages 1 and 2 when an officer is newly appointed to your agency, or has previously left the agency and returns.

- Submit only page 1 when an officer continues to be appointed by your agency, but has a change from one status, as listed in Box 15, to a different status, or is promoted to Chief.
- 5. Enfer any necessary information for a Correction to Record, submitting all affected pages, and attach a letter explaining the requested change.

OFFICER INFORMATION		(Finit) (	M(ddle)	2. Social Security Number
3. Previous Name(s) or Alas (Last)		(First)		(Middle)
	's Individual Ernel Address	<u></u>		6. Phone Number
7. Home Meiling Address (#/StreetPO Box)		(City)	(State)	Zip Code) (County Name)
(Only assertate Wikin to the	•	(Academy Numb	or) (Detos	of Training)
AGENCY INFORMATION Akron Poll	e ce Department			
10. Reporting Authority's Emeli Address  chiefsaide@akronohio.gov		11. Agency Phone Number 330-375-2244		
Provious Name(s) or Alaes (Last)  Stitution of Alaes (Last)  Stitution of Alaes (Last)  Stitution of Alaes (Assumed Cast)  State of Training Address (Assumed Po Box)  Alaron Police Department  Sency Information  Sency Infor				
		13 New Appointment Date	1 34	Stohut Change Dele
				/ /
For the purpose of this form, full-time means those in active p	ey status (Including those on	AuxiliaryRes- vecetion, sick, bersavement, personal	erveS or administrative leave; o	pecialSeasonal on compensatory time or hofidays) receiving
✓ City Full-Time/Part-Time (737.02)	City Auxilia	ary/Reserve/Special (737.051)	City Chic	of (737.02)
Village Full-Time/Part-Time/Special (737.1	6)Village Au	xiliary/Reserve (737.161)	Viliage C	Chief (737.15)
Township Police Officer (505.49)	Township	Constable (509.01)	Other Ch	nief - List ORC/Charter
Other - List ORC/Charter	Deputy Sh	eriff (311.04)	Sheriff (3	311.01)
10	ORITY OWN and co	free will and volition. I attest that correct and is based on my pers owledge that submission of fals	it the information pro ional knowledge or	ovided on this document is true inquiry. I further understand and
17. Signature of Reporting Aythority	1	-		19. Date
1 pu			e	
20. Signature of Witness	1	•		22. Date
	. Charles A.	Hrown		

SF400adm Page 1 of 2 Effective 02/05/2019 This form may be emailed to: SF400@ohloattorneygeneral.gov

Officer Name (Last)	(First)	(Middle)	Social Security Number
23. OATH OF OFFICE			
I do solemnly swear or affirm	n that I will support the Constitution ar	d Laws of the United States of	f America, the Constitution and
I do solemnly swear or affirm Laws of the State of Ohio, a	n that I will support the Constitution are and Laws and Ordinances of the political discharge the	al subdivision to which I am a	f America, the Constitution and ppointed and to the best of my
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Laws of the State of Ohio, a	and Laws and Ordinances of the politic	al subdivision to which I am a duties of this office.  Daniel Horrigan	ppointed and to the best of my

### OHIO PEACE OFFICER APPOINTMENT HISTORY

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

24. Appointed By (Agency	Name and County):			25. From(mm/dd/yyyy):	······	To(mm/dd/yyyy):
26. Appointment Status (CI	neck Appropriate Box)Part-Time	Auxiliary	Reserve	Special	Seasonal	
27. Appointed By (Agency	Name and County):			28. From(mm/dd/yyyy):		To(mm/dd/yyyy):
29. Appointment Status (CI		Auxitary	Reserve	Special	Seasonal	
30. Appointed By (Agency	Name and County):			31. From(mm/dd/yyyy):		To(mm/dd/yyyy):
32. Appointment Status (Cl	neck Appropriate Box) Part-Time	Auxilary	Reserve	Special	Seasonal	
33. Appointed By (Agency	Name and County):			34. From(mm/dd/yyyy):	· · ·	To(mm/dd/yyyy):
35. Appointment Status (Cf	neck Appropriate Box) Part-Time	Auxiliary _	Reserve	Special	Seasonal	
36. Appointed By (Agency I	Name and County):		· · · · · · · · · · · · · · · · · · ·	37. From(mm/dd/yyyy):	<del></del>	To(mm/dd/yyyy):
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SF400adm Page 2 of 2 Effective 02/05/2019

This form may be emailed to: \$F400@ohioattorneygeneral.gov



## OHIO PEACE OFFICER TRAINING COMMISSION

THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

has completed the Ohio Peace Officer Basic Training Program

Conducted by

**Akron Police Department** 

Awarded On May 29, 2020

Dave Vost Attorney General

Vernon P.Stanforth, Charperson Ohio Peace Officer Training Commission



Dwight A Holcomb, Executive Director Ohio Peace Officer Training Commission

School Commander

BAS19-090 200556

# OHIO ATTORNEY GENERAL ORECOGNITION OF COMPLETION AWARD

This certificate of completion is awarded to

For successfully completing the Webcast course

# **OHLEG Security Training**

issued on

Expires in 2 years

Joseph A. Morbitzer, BCI SUPERINTENDENT



### **Akron Police Department** Weapons Training Report

**Range Course Results** Type: Any Officers filtered: 1

6 re	esults returned								
ID	Officer	Date/Time	Training Type	Weapon Type	Manufacturer	Model	Serial #	Result	Notes
		02/24/2022 10:00	Rifle	Rifle	Springfield			Passed	
		12/22/2021 23:30		Semi-Automatic Pistol	Glock	G5-17		Passed	
		08/16/2021 10:00		Rifle	Springfield			Passed	
		05/11/2021 12:30	<b>Duty Pistol Qualification</b>	Semi-Automatic Pistol	Glock	G5-17		Passed	
		01/05/2021 23:30		Semi-Automatic Pistol	Glock	G5-17		Passed	
		05/07/2020 08:00	Rifle	Rifle	Springfield			Passed	

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CHY OF AKRON EMPLOYEE RECORDS

EMPLOYEE RECORDS

CITY OF AKRON EMPLO	EE PERFORMA	NCE EVALUAT	<b>ION REP</b>	ORT			CSC 1-00
EMPLOYEE NAME	DIVISION		CLASS TITLE		_		
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7. REPORT DISCUSSION		EMPLOYEE: YOUR SIGNATU					
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CITY OF AKRON EMF	PLOYEE	PERFORM/	ANCE EVA	LUATIO	N REP	ORT	·			CSC 1-0
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Name:				ID:	Badge#:	Payro	oll ID:
SSN:	DO	B:	Status: A	CTIVE	Serv	rice Date:	12/09/2019
Appointed:	12/09/2019	OPOTC:		Sworn In: 0	5/29/2020	Separation	on:
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ASSIGNMEN	NTS						
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TRAINING 05-05-2020	OHLEG SEG	CURITY TRAININ	NG				
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BAS19-090	Akron Police Department	12/11/2019	4/30/2020	5/18/2020	5/29/2020

<b>Employment History</b>				
Officer Name (Officer) (Officer)	Agency Name (Agency) (Agency)	Start Date	Employment Dat End Date	Employment Dat Emp. Status (Emp
	Akron Police Department	5/29/2020	Appointment	Full-time