Report of Activities for Calendar Year 2017

MUNICIPAL CIVIL SERVICE

CITY OF Green____, OHIO

Present Population: 25,699 Name of Mayor: Gerard Neugebauer

1. <u>CIVIL SERVICE COMMISSION</u>

Date originally organized: 01/01/1993

Present Members	Name	Term Expires
Chairman	Robert Calderone	12/2020
Member	Gerald Alessia	12/2018
Member	Kimberly Baer	12/2023

Secretary: Melinda Svenson

Commission Mailing Address	1755 Town Park Boulevard, PO Box 278	
Telephone Number: (330) 896-4		
Primary Contact Email Address: msvenson@cityofgreen.org		

2. FISCAL OPERATIONS

Appropriations received from City:	\$40,375.00	
Appropriations received from School Board:		
Expenditures for Calendar Year:	\$9,783.34	

3. NUMBER OF POSITIONS

Types of Positions	Classified	Classified & Provisional	Unclassified	Total
In Municipal Service	109	0	34	143.0
In Health District Service	0	0	0	0
In School Service	0	0	0	0

4. NUMBER OF EXAMINATIONS ADMINISTERED

	# of Exams	Applications Filed		Did Not Appear	Failed	Passed
Entrance	0	0	0	0	0	0
Promotional	1	5	1	0	0	4

Please attach a separate listing of classifications for which examinations were given

5. NUMBER OF CERTIFICATIONS AND APPOINTMENTS

Applicants appearing on Certified Lists:	120	
Appointments from Certified Eligible Lists:	5	
Total Appointments:	5	

6. NUMBER OF TERMINATIONS

Resignations	Retirements	Removals	Disability Separations
2	2	0	0

7. NUMBER OF APPEALS HEARD

Removals	Suspensions	Layoffs	Classifications	Investigations
0	0	0	0	0

Please attach separate documents showing disposition of appeals heard, including all cases appealed to court.

8. NUMBER OF COURT DECISIONS ISSUED

Number of Court Decisions issued during year on civil service matters in which municipality or municipal employee was a party: _____ Please attach copies of court decisions

9. NUMBER OF ATTORNEY OPINIONS ISSUED

Number of attorney opinions or opinions of special counsel issued during year on civil service matters:

0

Signature of Chairman or Secretary:	JUL SA
Date:	02/14/2018

Retain a copy of your completed form for your records.

PLEASE ATTACH A COPY OF YOUR ANNUAL REPORT, IF AVAILABLE, AND A CURRENT COPY OF YOUR MUNICIPAL CIVIL SERVICE RULES, <u>IF THEY HAVE BEEN AMENDED</u> SINCE YOUR LAST FILING

Return your completed form to:

State Personnel Board of Review 65 East State Street, 12th Floor Columbus, OH 43215 614-466-7046 / FAX 614-466-6539

If you have any questions regarding completion of this Report of Activities form please contact SPBR for assistance

2017 Number of Examinations Administered:

Service Supervisor (Promotional)

Exam Date: 09/18/2017 Applications: 5 Qualified: 4 Not Qualified: 1 Passed: 4 Failed: 0 Did not show:0 Certified List: 4 Appointed: 01 (1 FT)

Applicants appearing on Cert. Lists

48 Firemedics (List est. 11/29/2016)

27 Service Worker I (List est. 10/12/2016)

19 Service Worker II (List est. 10/12/2016)

26 Secretary (List est. 9/27/2016)