

006 3% PF0409-65,015.50 Boni

7.16.20 Rating Period

7.16.18

Metropolitan Government of Nashville and Davidson County

EMPLOYEE PERFORMANCE EVALUATION

Employ	ee Name	: Benjam	in S	Powers
ETTIDION	GG TAQUIE	· Delilatii	111 3	LOWERS

Title/Department:

Firefighter 2

Employee #: 621693

Supervisor Name/Title: Patrick I hunt/Capt.

Evaluation Type: Annual O Probationary/Work Test O Targeting O Other

Performance Rating Definitions

- 1 Needs Improvement: Performance fails to meet the minimum performance standards of the position.
- 2 Successful: Performance meets the standards of the position.
- 3 Exceptional: Performance is significantly above the performance standards of the position.

A.MAJOR JOB RESPONSIBILITIES: List the responsibility, rate the performance level, and provide comments to support your ratings. *NOTE: A rating of 1 or 3 must be documented.

Responsibility	1	2	3	Comments		
1. Firefighting and rescue operations	0	0	•	F/F Powers has high competence in rescue operations and is equally capable in his firefighting duties.		
2. General station and equipment maintenance	0	0	•	F/F Powers needs no promting for station work or equipment maintenance.		
3. Training and continuous education programs, to include relief driving:	0	0	•	F/F Powers is all in on training and is involved in furthering his education in respects to his job. He is a excellent relief driver.		
4. First responder medical activities	0	0	•	F/F Powers is proficient with his EMT skills, proactive and positive team member on the scene.		
5. Relief apparatus driving and scene operations (if applicable)	0	•	0			
6.	0	0	0			
7.	0	0	0			
8.	0	0	0			
	0	0	0			
10.	0	0	0			

B. CORE COMPETENCIES: Mark a rating indicating how well the employee displays the compentency and provide comments to support your ratings.

Competency	1	2	3	Comments
Adaptability/Flexibility: Displays willingness and ability to adjust to change in assignments, schedule, rules, and procedures in a timely manner.	0	•	0	
2. Communications: Receives and relays information in a clear, accurate, and respectful manner. Conveys information effectively through verbal and written means.	0	0	•	F/F Powers has a calm demeanor, he is well spoken and clearly conveys facts verbally and in written form.
3. Customer Relations: Displays positive, cooperative, and respectful approach when interacting with customers and focuses on meeting customer needs and gaining results.	0	0	•	F/F Powers understands that the NFD is here to furnish a service and interrelates with the public with regard and a positive approach.
4. Dependability: Takes personal responsibility for the quality and timeliness of work, and achieves results with little oversight.	0	•	0	
5. Initiative: Demonstrates appropriate independent action, self-application, self-improvement; and innovation to achieve results and to address gaps and issues with supervisory guidance.	0	0	•	F/F Powers la resourceful and self-rellant but takes guidances when required,
6. Teamwork/Peer Relations: Displays a positive, cooperative, and respectful approach when interacting with other employees. Demonstrates ability to work effectively in a team to achieve results.	0	0	•	F/F Powers has a positive attitude and is very respectful with all outher employees.

C. EXPECTED WORK BEHAVIORS: Mark the appropriate rating and provide comments if needed. Comments must be provided for a rating of Unacceptable.

Behavior	Acceptable	Unacceptable	Comments		
1. Attendance: 34	•	0	·		
2. Compliance with Rules	•	0		A STATE OF THE STA	***************************************
3. Observance of Work Hours	•	0	100		

A rating of Unacceptable for any of the above items constitutes an overa	ll Unsatisfactory	evaluation and requires the following:
Documentation of specific problem(s) and corrective and/or discipl	• •	
Authorization of next level manager.	Signature	
Authorization of departmental/Metro Human Resources office.	Signature	

D. GOAL ACHIEVEMENT (This section should be completed only if you used the Performance Plan form to set goals at the beginning of the rating period. This is Intended for developmental purposes and is not calculated as part of the performance rating.) Indicate whether or not the employee achieved their performance and developmental goals for the year. Provide comments if needed.

Goal	Successful	Ongoing	Comments		
1.	0	0			
2.	0	0			
3.	0	0			
4.	0	0			
5.	0	0		11.1	

ADDITIONAL COMMENTS:	
DED DOWN A A NOTE TO A PRESENCE. The suppose of each goaling and light a blood and	
PERFORMANCE RATINGS: The average of each section and list in the design of the Section A and B ratings.	gnated area. The Overall rating is the average
Section A 2.8 Section B 2.7	Overall 2.7
Section A Section B 2.7	Overall 2.7
This form acknowledges that my supervisor and I met and disucssed this perfor	mance avaluation. My signature does not imply
that I agree with these evaluation results.	***
Employee's Signature /	Date 6-3-2019
Supervisor's/Raters's Signature Patro I Huro	Date 6-3-2019
Man B	Date 6-3-19
Reviewer's Signature H. 1902	Date 3 11
Director's Signature (optional)	Date

Benjamin S Powers

emp# 621693

MISC.	FRS	ENT	rry
1111201		DET !	1 1 3 1

SUSPENSION/MILITARY LEAVE/FMLA/SH	ORT-TERM DISABILIT	Y/LWOP
PAY STATUS		
05 17 2019 LEAVE BEGIN DATE	06/3/2019	_LEAVE END DATE
CHECK ROUTE CODE		
NEW		

DISCIPLINARY AGREEMENT

The purpose of this Memorandum is to set forth the terms of an agreement reached between representatives of the Nashville Fire Department (NFD) and NFD employee Benjamin Powers.

Benjamin Powers as a result of the following actions:

On April 27, 2019 while working overtime on foot patrol at the NFL draft, Commander Clymer was made aware you were not wearing department issued uniform or your safety vest as required in Memo 19-066. In addition it was reported to Commander Clymer that you were almost two (2) blocks from your assigned location after instruction that you were to remain at your assigned location. Accordingly you were relieved of your duties and sent home.

Based on this information, you are alleged to have violated the following rules/laws:

- o Civil Service 6.7 #1 Neglect or failure to perform your official duties
- Civil Service 6.7 # 5 Neglect or disobedience to the lawful and reasonable orders given by a supervisor.
- o Civil Service 6.7 #11 Violation of any written rules, policies or procedures of the department in which the employee is employed.

On this day, the NFD representative met with Benjamin Powers. The parties reached an agreement that effectively disposes of all disciplinary charges that would be considered as a result of this misconduct.

In exchange for NFD's promise to pursue no further disciplinary action related to Benjamin Powers misconduct outlined above, he hereby agrees to accept a twenty (20) day suspension. He will be allowed to forfeit up to 10 vacation days from his balance in lieu of serving the suspension. This will not impact his leave accrual he may earn. In addition Benjamin Powers will be reassigned and not allowed to participate in the bid process for two (2) years.

FURTHERMORE, Benjamin Powers waives any appeal related to said sanctions, and agrees to pursue no further cause of action regarding them.

Both parties acknowledge their best interests are served by disposal of these potential charges in an expedient manner that eliminates, for Benjamin Powers, the risk that a panel will recommend a harsher sanction.

The NFD and Benjamin Powers acknowledge and agree that this Memorandum pertains to ALL, and ONLY, the incidents of misconduct described within its corners.

Benjamin Powers acknowledges the representative of the NFD, has advised that this Memorandum and the misconduct that precipitated it will be taken into account if there are further incidents of misconduct, and that such misconduct could result in further disciplinary action up to and including termination of employment.

By their signatures below, Benjamin Powers and the NFD, by and through its representative, each acknowledges:

- 1) the factual accuracy of events herein described,
- 2) an agreement to be bound by the terms of this Memorandum, and,
- 3) that each enters the agreement knowingly, voluntarily, and willingly.

Benjamin Powers

Date

Date

Date

Date

Smith, Michele (NFD-ADM)

From:

Natali, Jaime (NFD)

Sent:

Wednesday, May 15, 2019 7:49 AM

To:

Summers, Jamie (NFD-ADM); Smith, Michele (NFD-ADM); Moreland, Jerry (NFD);

Manning Sr, Lenny

Cc:

Goins, Angie (NFD-ADM); Boatman, Cissy (NFD)

Subject:

RE: Disciplinary agreement

10 days have been deducted.

From: Summers, Jamie (NFD-ADM)

Sent: Wednesday, May 15, 2019 7:44 AM

To: Smith, Michele (NFD-ADM); Moreland, Jerry (NFD); Manning Sr, Lenny Cc: Goins, Angle (NFD-ADM); Boatman, Cissy (NFD); Natall, Jaime (NFD)

Subject: Disciplinary agreement

Michele please get with Chief Manning to discuss suspension days. Jaime deduct his 10 days from his vacation balance. Cissy please scan to his file.

Thanks everyone.

Smith, Michele (NFD-ADM)

To:

Powers, Benjamin (NFD)

Cc:

Goins, Angie (NFD-ADM)

Subject:

Disciplinary Agreement

Per your Disciplinary Agreement signed May 14,2019, you have agreed to a suspension of twenty (20) days.

Per the agreement you were allowed to forfeit ten (10) vacation days in lieu of ten (10) days suspension. Those days have been adjusted from your accrued leave balance in TeleStaff.

The remain ten (10) days will be served as suspension days. Chief Manning will get with you next week to schedule those days.

If you have any questions, let me know.

Michele

Michele P Smith

Michele P Smith Administrative Services Officer IV Nashville Fire Department P O Box 196332 Nashville, TN 37219-6332

615-862-5427 Office 615-214-3627 Fax 621693

DISCIPLINARY AGREEMENT

The purpose of this Memorandum is to set forth the terms of an agreement reached between representatives of the Nashville Fire Department (NFD) and NFD employee Benjamin Powers.

Benjamin Powers as a result of the following actions:

On April 27, 2019 while working overtime on foot patrol at the NFL draft, Commander Clymer was made aware you were not wearing department Issued uniform or your safety vest as required in Memo 19-066. In addition it was reported to Commander Clymer that you were almost two (2) blocks from your assigned location after instruction that you were to remain at your assigned location. Accordingly you were relieved of your duties and sent home.

Based on this information, you are alleged to have violated the following rules/laws:

- o Civil Service 6.7 #1 Neglect or failure to perform your official duties
- o Civil Service 6.7 # 5 Neglect or disobedience to the lawful and reasonable orders given by a supervisor.
- Civil Service 6.7 #11 Violation of any written rules, policies or procedures of the department in which the employee is employed.

On this day, the NFD representative met with Benjamin Powers. The parties reached an agreement that effectively disposes of all disciplinary charges that would be considered as a result of this misconduct.

In exchange for NFD's promise to pursue no further disciplinary action related to Benjamin Powers misconduct outlined above, he hereby agrees to accept a twenty (20) day suspension. He will be allowed to forfeit up to 10 vacation days from his balance in lieu of serving the suspension. This will not impact his leave accrual he may earn. In addition Benjamin Powers will be reassigned and not allowed to participate in the bid process for two (2) years.

FURTHERMORE, Benjamin Powers waives any appeal related to said sanctions, and agrees to pursue no further cause of action regarding them.

Both parties acknowledge their best interests are served by disposal of these potential charges in an expedient manner that eliminates, for Benjamin Powers, the risk that a panel will recommend a harsher sanction.

The NFD and Benjamin Powers acknowledge and agree that this Memorandum pertains to ALL, and ONLY, the incidents of misconduct described within its corners.

Benjamin Powers acknowledges the representative of the NFD, has advised that this Memorandum and the misconduct that precipitated it will be taken into account if there are further Incidents of misconduct, and that such misconduct could result in further disciplinary action up to and including termination of employment.

By their signatures below, Benjamin Powers and the NFD, by and through its representative, each acknowledges:

- 1) the factual accuracy of events herein described,
- 2) an agreement to be bound by the terms of this Memorandum, and.
- 3) that each enters the agreement knowingly, voluntarily, and willingly.

| S-14-26/9 | Date | Da

ORACLE JD Edwar	rds EnterpriseOne	Roles ▼	Personalization -	Help NATALI, JAIME	L [JPD910] Sign Out
Home Navigator 🕶	Oben Applications 🕶		Recent'Reports 🕶	Favo	orites 🕶
D Open Applications	Employée Information - i	Employee	***		D T W
Recont Reports				"	
> Favorites	图 X 图 form M Tools	- December 1/2		-	
		AND STATES AND CONTRACT AND	AND A STORE WITH DESIGN & AMERICAN	en 11 an desert to preside the property of	
	Employee No.	621693	POV	vers, Benjamin S	
	Employee Tax ID				
	Alternate Employee No	·			وبندير سادهما ومدعد ومدعد
1	Security Business Unit	32195510	FIR USD Fire	Operations	
	Hame Fund *	Principal participants of the control of the contro	General		
	Check Route Code	032FIR4-02	FIRE STATION 2		
	Pay Frequency *	S Semi-Mont	• 1.		
	Pay Status	0 Active			
		Amirol		Last Day Made of	
	Employee Benefit Status	A Active	Mallian A. Proce bladformand	Last Day Worked	
	Benefit Group	P&F-UN	Police & Fire Uniformed	Cont Svc Date	02/16/2008
	Original Hire Date	02/16/2008	Date	Started	02/16/2008
	Leave Begin Date	02/04/2019	Leav	e End Date	02/17/2019
	Expected Recall Date		Ten	nination Date	
	Date Pay Starts	02/16/2008	Date	Pay Stops	
	Data Protection Standards		finan	Termination	Country of E
	Data Protection Code				Country Code
	Data Protection Date			love to Applicant Pool	
		8			

http://c0206pd.nashville.org:3206/jde/E1Menu.maf?envRadioGroup=&jdeowpBackButtonProtect=PROT... 4/22/2019

DAVID BRILEY MAYOR 621693

METROPOLITAN GOVERNMENT AND DAVIDSON COUNTY

WILLIAM SWANN DIRECTOR-CHIEF Nashville fire Department P.O. Box 196332 Nashville, TN 37219-6332 (615) 862-5421

March 20, 2019

Benjamin Powers 7004 Lama Terra Court Goodlettsyllie, TN 37072

Mr. Powers,

A disciplinary hearing was held on Thursday March 14, 2019. After reviewing the information presented during your disciplinary hearing, you have been found guilty of the following charges:

- Nashville Fire Department Operational Procedures and Guidelines Social Media Policy Section 11.2
- Adherence to Policy & Rules of the Metropolitan Government
 - Civil Service Rule 6.7
 - o Conduct Unbecoming an Employee of the Department
 - o Any failure of good behavior which reflects discredit upon himself, the department and/or the Metropolitan Government.

Based on the findings, a disciplinary measure of five (5) days suspension is being imposed. You may request to use vacation days in lieu of serving the suspension; however, if you wish to do so, you must let me know in writing. You will be allowed to accrue sick and vacation leave for the month. Be aware that any issues requiring disciplinary action involving you in the future may result in more progressive discipline up to and including termination.

Please note you have 10 calendar days to request a second meeting with the Appointing Authority to provide additional new evidence. Attached is Section 6.6 and 6.8 of the Civil Service Rules. Review the entire document for an understanding of the disciplinary process and your rights to appeal my decision under these rules.

Respectfully,

William Swann Director-Chief

co: Jamie Summers, Human Resources Manager Personnel File

SECTION 6.6 - DUE PROCESS

No suspension, demotion, or dismissal of a Civil Service employee shall become effective until due process is provided for the employee as outlined below:

Summary

1. Notification of charges in writing

2. Informal Departmental meeting or hearing

3. Notification in Writing of action taken (within 10 calendar days)

Optional:

4. Option to meet with Department Head to present additional evidence

- Right to Appeal decision to the Civil Service Commission. The hearing is conducted by an Administrative Law Judge, or Hearing Officer, or the full Commission as provided for in these rules,
- 6. Review of Order by full Commission
- Notification of charges: The employee shall be notified of the charges against him. Such notification shall
 detail times, places, and other pertinent facts concerning the charges and should be in writing. The
 notification will provide for the employee to have a meeting with the Appointing Authority or designee prior to
 taking disciplinary action. The notification will state the mechanism through which such discussion may be
 arranged.
- 2. Departmental Meeting/Hearing: The meeting/hearing shall be informal and conducted for the purpose of explaining the department's charges against the employee, and allowing the employee's response. The manager conducting such discussions shall be an Appointing Authority or designee.
 - Note: The employee shall have the right to a representative. The employee shall have the right to present statements, witnesses, or any other information with regard to the charges. Attendance and participation by persons other than the manager, the employee, the employee's representative's, and witnesses shall be at the discretion of the manager. The employee shall be able to obtain any documents and/or statements made by witnesses regarding the charges before the hearing, unless prohibited by law. If the employee or his representative declines the opportunity to have the meeting / hearing, the provisions of this section will be deemed met.
- 3. Notification of action taken: The employee must be notified in writing of the action taken within ten (10) calendar days, and this notice must also advise the employee that within (10) calendar days, he may request a second meeting with the Appointing Authority to provide additional new evidence.
- 4. Department Head meeting (optional): An employee requesting such a meeting must do so in writing and must specify in the request what <u>additional evidence</u> may be brought forth. If the employee submits the additional evidence in writing, the Appointing Authority shall meet with the employee and/or his representative within ten (10) days of receiving notice or may delegate this responsibility to his second in command, provided such manager did not conduct the original meeting.
- Appeal to the Civil Service Commission: An employee may appeal disciplinary action in accordance with section 8.8C. The notice of disciplinary action shall include a statement notifying the employee of the following appeal requirements.
 - a. The request must be <u>filed within fifteen (15) calendar days of notification of the disciplinary action taken</u>, unless the employee has filed a timely written request with the

Appointing Authority to consider additional evidence. In that event the employee shall have fifteen (15) calendar days after a written response from his department to file an appeal with the Civil Service Commission.

NOTE: The Administrative Law Judge or Hearing Officer shall determine as a preliminary matter to the merits of an appeal, an employee's allegation that he or she was denied minimum due process. Procedures may be established within a department for the conduct of the meetings and for meetings at one or more levels within the organization. If more than one level is used this shall be spelled out in a written procedure.

SECTION 6.8 - DISCIPLINARY ACTION APPEAL TO CIVIL SERVICE COMMISSION

A. INTRODUCTION

Any employee demoted for cause, suspended, or dismissed from the Civil Service may appeal the action to the Civil Service Commission for a hearing. The proceedings or any part thereof:

- Shall be conducted by a majority of the Commission slitting with an administrative judge or hearing officer;
- (2) Shall be conducted by an administrative judge or hearing officer sitting alone, subject to review by a majority of the Commission.
- (3) Combined Hearings: With the agreement of all parties, an Administrative Law Judge may conduct an appeal of a suspension or temporary demotion jointly with an appeal of dismissal in those cases where the employee has been dismissed prior to the appeal of the suspension or temporary demotion having been heard. Upon agreement of all parties, the appeal of the suspension or temporary demotion may be reassigned from the Hearing Officer/Commissioner to the Administrative Law Judge. Cases are assigned based on the type and severity of disciplinary action imposed and subject to available funds. Specific guidelines for assigning cases, setting hearing dates, and conducting proceedings are set out in Civil Service Policy 8.8 1, Appeal Proceedings. Any provisions in that policy may be suspended where good cause has been shown and upon majority vote by the Civil Service Commission.

In any situation that arises that is not specifically addressed by the policy, reference may be made to the Uniform Administrative Procedures Act Part 3 - Contested Cases T.C.A. 4-5-301, et seq and the Tennessee Rules of Civil Procedure for guidance as to the proper procedure to follow, where appropriate and to whatever extent will best serve the interest of justice and the speedy and inexpensive determination of the matter at hand.

B. TIME

In computing any period of time prescribed or allowed by statute, rule, or order, the date of the act, event or default is not to be included. The last day of the period so computed is to be included unless it is a Saturday, a Sunday, or a legal holiday, in which event the period runs until the end of the next day which is neither a Saturday, a Sunday, or a legal holiday. When the period of time prescribed or allowed is less than seven days, intermediate Saturdays, Sundays, and legal holidays shall be excluded in the computation.

Except in regard to petitions for review under T.C.A. 4-5-315, 4-5-317, and 4-5-322, or where otherwise prohibited by law, when an act is required or allowed to be done at or within a specified time, the agency or the administrative judge may, at any time, (1) with or without motion or notice order the period enlarged if the request is made before the expiration of the period originally prescribed or as extended by previous order, or (2) upon motion made after the expiration of the specified period, permit the act to be done late, where the failure to act was the result of excusable neglect. Nothing in this section shall be construed to allow any ex-parte communications concerning any issue in the proceedings that would be prohibited by T.C.A. 4-5-304.

C. COMMENCEMENT OF CONTESTED CASE PROCEEDINGS

Commencement of Action - An appeal of disciplinary action must be commenced by filling Notice of Appeal with the Secretary to the Commission. Said request must be made within 15 calendar days after notification by the Appointing Authority of said action.

Answer. Any employee or former employee appealing any disciplinary action taken against him shall with his notice of appeal file an answer or statement setting forth the reason said employee is appealing.

Notice of Hearing - In every contested case, except those heard by an Administrative Law Judge from the Office of the Secretary of State, a notice of hearing shall be issued by the

Secretary to the Commission. The notice shall comply with T.C.A. 4-5-307 (b). Included with the notice will be a copy of the charge and/or determination letter from the appointing authority setting out the reasons for disciplinary action and a copy of the hearing procedures to be followed. A copy of the notice will be sent to the Department of Law. Notice of hearings set before an ALJ will be issued by the Administrative Procedures Division of the Office of the Secretary of State.

Within 20 calendar days from the receipt of the Notice of Hearing a representative of the Department of Law shall file with the Secretary to the Commission formal Charges and Specifications. The Charges and Specifications shall set out the specific act(s) or event(s) leading to the disciplinary action being taken, and shall set out the specific Civil Service Commission Rules and Regulations, the Charter Provision, Executive or Administrative Order, Department Rule, or Regulation, Ordinance, Law, or other regulation violated.

D. SERVICE OF NOTICE OF HEARING

A copy of the notice of hearing must be delivered by return receipt mail or served personally on the appellant and/or his designee. No hearing shall be held, unless otherwise specified by statute, until the expiration of 30 days from service of the notice upon all parties.

Since each employee is required to keep the Civil Service Commission informed of his current address, service of notice shall be deemed complete upon placing the notice in the mall to the last known address of such party. However, in the event of a motion for default where there is not indication of actual service on a party, the following circumstances will be taken into account in determining whether to grant the default, in addition to whether service was complete as defined above:

- Whether any other attempts at actual service were made;
- Whether and to what extent actual service is practicable in any given case;
- What attempts were made to get in contact with the party by telephone or otherwise; and
- 4. Whether the Commission has actual knowledge or reason to know that the party may be located elsewhere than the address to which the notice was malled.

E. REPRESENTATION

- 1. Any party may participate in the hearing in person or, if the party is an agency of Metropolitan Government, by a duly licensed attorney.
- Whether or not participating in person, any party may be advised and represented at the party's own expense by a licensed attorney.

3. Attorney General's Opinion #97-164, as adopted by the Civil Service Commission on March 10, 1998, provides that a duly licensed attorney must represent all parties, who wish to have representation in hearings before the commission. All parties in a contested case hearing shall be notified of their right to be represented by counsel. An appearance by a party at a hearing without counsel may be deemed a walver of the right to counsel. ORACLE' JD Edwards EnterpriseOne Roles - Personalization - Help SMITH, MICHELE P. (JPD910) Sign Out

mployes Informatio	***************************************		**************************************	C. (Errorean Control			7
Employee No.	621693	POWER	s, benjamin s				
Alternate Employee No Security Business Unit Home Fund * Check Route Code Pay Frequency * Pay Status Employee Benefit Status Benefit Group	32195510 18301	FIR USD Fire O	Derations Last Day Worked Cont Svc Date	02/16	7/2008		
Original Hire Date Leave Begin Date Expected Recall Date Date Pay Storts	02/16/2008 04/01/2019 02/16/2008	Date St. Leave E Termina Date Pa	nd Date Mon Date	02/16/20			
Data Protection Standards Data Protection Code Data Protection Data			rmination to Applicant Pool		Country of Emp	loyment US	Unit

Suspensione effective 4/1/2019

Complete the Complete Comp

Smith, Michele (NFD-ADM)

From:

Smith, Michele (NFD-ADM)

Sent:

Wednesday, April 3, 2019 7:28 AM

To:

Powers, Benjamin (NFD)

Cct

Goins, Angle (NFD-ADM)

Subject:

FW: 5 days

Per your disciplinary action letter dated March 20, 2019, you received a disciplinary action of five (5) days suspension. Chief Manning has approved for you to forfelt five (5) vacation days in lieu of five (5) days suspension. Five (5) vacation days have been adjusted from your accrued leave in TeleStaff.

If you have any questions, please let me know.

Michele

Michelo P Smith

Michele P Smith Administrative Services Officer IV Nashville Fire Department P O Box 196332 Nashville, TN 37219-6332

615-862-5427 Office 615-214-3627 Fax

From: Manning Sr, Lenny

Sent: Monday, April 1, 2019 1:37 PM

To: Summers, Jamie (NFD-ADM); Smith, Michele (NFD-ADM); Natall, Jaime (NFD)

Cc: Tomlinson, Jerry (NFD) Subject: FW: 5 days

I am good with this,

From: Powers, Benjamin (NFD)

Sent: Monday, April 01, 2019 11:48 AM

To: Manning Sr, Lenny

Cc: Hunt, Patrick (NFD); Monast, Maurice (NFD)

Subject: 5 days

Commander Manning,

I would like to use 5 vacation days taken from my accrued leave.

Thank you

Benjamin S Powers emp#621693

A	MISC.	FRS	FN:	rry

LEAVE					
SUSPENSION	MILITARY	LEAVE/FMLA	/SHORT-TERM	DISABILITY/	LWOP

Ø PAY STATUS

OHOL 2019 LEAVE BEGIN DATE

CHECK ROUTE CODE

NEW

Smith, Michele (NFD-ADM)

From:

Summers, Jamle (NFD-ADM)

Sent:

Friday, March 22, 2019 9:27 AM

To:

Smith, Michele (NFD-ADM)

Cc:

Natall, Jalme (NFD); Manning Sr, Lenny; Goins, Angle (NFD-ADM); Boatman, Cissy (NFD);

Tomlinson, Jerry (NFD)

Subject:

Powers Suspension

Attachments:

Ben Powers - Sanction letter.pdf

For your records.

Michele, please get with Chief Manning/Tomlinson and find out how they are going to use his days.

Jamle Summers Human Resources Manager Nashville Fire Department 615-862-5242 fax: 615-214-3242



Boatman, Cissy (NFD)

From:

Goins, Angie (NFD-ADM)

Sent:

Monday, April 1, 2019 2:01 PM

To:

Summers, Jamie (NFD-ADM); Boatman, Cissy (NFD)

Subject:

RE: 5 days

Thanks

621693

From: Summers, Jamie (NFD-ADM) < Jamie. Summers@nashville.gov>

Sent: Monday, April 1, 2019 1:55 PM

To: Boatman, Cissy (NFD) < Cissy.Boatman@nashville.gov> Cc: Goins, Angie (NFD-ADM) < Angie.Goins@nashville.gov>

Subject: FW: 5 days

Please add to the file.

Jamie Summers Human Resources Manager Nashville Fire Department 615-862-5242

fax: 615-214-3242



From: Manning Sr, Lenny

Sent: Monday, April 1, 2019 1:37 PM

To: Summers, Jamie (NFD-ADM); Smith, Michele (NFD-ADM); Natali, Jaime (NFD)

Cc: Tomlinson, Jerry (NFD)
Subject: FW: 5 days

I am good with this.

From: Powers, Benjamin (NFD)

Sent: Monday, April 01, 2019 11:48 AM

To: Manning Sr, Lenny

Cc: Hunt, Patrick (NFD); Monast, Maurice (NFD)

Subject: 5 days

Commander Manning,

I would-like to use 5 vacation days taken from my accrued leave.

Thank you

Benjamin Powers

METROPOLITAN GOVERNME

WILLIAM SWANN DIRECTOR-CHIEF

NASHVILLE FIRE DEPARTMENT P.O. BOX 196332 NASHVILLE, TN 37219-6332 (615) 862-5421

AND DAVIDSON COUNTY

6a1693

March 20, 2019

Benjamin Powers 7004 Lama Terra Court Goodlettsville, TN 37072

Mr. Powers,

A disciplinary hearing was held on Thursday March 14, 2019. After reviewing the information presented during your disciplinary hearing, you have been found guilty of the following charges:

- Nashville Fire Department Operational Procedures and Guidelines Social Media Policy Section 11.2
- Adherence to Policy & Rules of the Metropolitan Government
 - Civil Service Rule 6.7
 - o Conduct Unbecoming an Employee of the Department
 - o Any failure of good behavior which reflects discredit upon himself, the department and/or the Metropolitan Government.

Based on the findings, a disciplinary measure of five (5) days suspension is being imposed. You may request to use vacation days in lieu of serving the suspension; however, if you wish to do so, you must let me know in writing. You will be allowed to accrue sick and vacation leave for the month. Be aware that any issues requiring disciplinary action involving you in the future may result in more progressive discipline up to and including termination.

Please note you have 10 calendar days to request a second meeting with the Appointing Authority to provide additional new evidence. Attached is Section 6.6 and 6.8 of the Civil Service Rules. Review the entire document for an understanding of the disciplinary process and your rights to appeal my decision under these rules.

Respectfully,

William Swann Director-Chief

Jamie Summers, Human Resources Manager Personnel File cc;

SECTION 6.6 - DUE PROCESS

No suspension, demotion, or dismissal of a Civil Service employee shall become effective until due process is provided for the employee as outlined below: Summary

1. Notification of charges in writing

2. Informal Departmental meeting or hearing

3. Notification in Writing of action taken (within 10 calendar days)

Optional:

4. Option to meet with Department Head to present additional evidence

- 1. Right to Appeal decision to the Civil Service Commission. The hearing is conducted by an Administrative Law Judge, or Hearing Officer, or the full Commission as provided for in these rules.
- 6. Review of Order by full Commission
- Notification of charges: The employee shall be notified of the charges against him. Such notification shall
 detail times, places, and other pertinent facts concerning the charges and should be in writing. The
 notification will provide for the employee to have a meeting with the Appointing Authority or designee prior to
 taking disciplinary action. The notification will state the mechanism through which such discussion may be
 arranged.
- Departmental Meeting/Hearing: The meeting/hearing shall be informal and conducted for the purpose of explaining the department's charges against the employee, and allowing the employee's response. The manager conducting such discussions shall be an Appointing Authority or designee.
 - Note: The employee shall have the right to a representative. The employee shall have the right to present statements, witnesses, or any other information with regard to the charges. Attendance and participation by persons other than the manager, the employee, the employee's representative's, and witnesses shall be at the discretion of the manager. The employee shall be able to obtain any documents and/or statements made by witnesses regarding the charges before the hearing, unless prohibited by law. If the employee or his representative declines the opportunity to have the meeting / hearing, the provisions of this section will be deemed met.
- Notification of action taken: The employee must be notified in writing of the action taken within ten (10)
 calendar days, and this notice must also advise the employee that within (10) calendar days, he may
 request a second meeting with the Appointing Authority to provide additional new evidence.
- 4. Department Head meeting (optional): An employee requesting such a meeting must do so in writing and must specify in the request what <u>additional evidence</u> may be brought forth. If the employee submits the additional evidence in writing, the Appointing Authority shall meet with the employee and/or his representative within ten (10) days of receiving notice or may delegate this responsibility to his second in command, provided such manager did not conduct the original meeting.
- Appeal to the Civil Service Commission: An employee may appeal disciplinary action in accordance with section 6.8C. The notice of disciplinary action shall include a statement notifying the employee of the following appeal requirements.
 - a. The request must be filed within fifteen (15) calendar days of notification of the disciplinary action taken, unless the employee has filed a timely written request with the

Appointing Authority to consider additional evidence. In that event the employee shall have fifteen (15) calendar days after a written response from his department to file an appeal with the Civil Service Commission.

NOTE: The Administrative Law Judge or Hearing Officer shall determine as a preliminary matter to the merits of an appeal, an employee's allegation that he or she was denied minimum due process. Procedures may be established within a department for the conduct of the meetings and for meetings at one or more levels within the organization. If more than one level is used this shall be spelled out in a written procedure.

SECTION 6.8 - DISCIPLINARY ACTION APPEAL TO CIVIL SERVICE COMMISSION

1 6 1 300 34

A. INTRODUCTION

Any employee demoted for cause, suspended, or dismissed from the Civil Service may appeal the action to the Civil Service Commission for a hearing. The proceedings or any part thereof:

- (1) Shall be conducted by a majority of the Commission sitting with an administrative judge or hearing officer; or
- (2) Shall be conducted by an administrative judge or hearing officer sitting alone, subject to review by a majority of the Commission.
- (3) Combined Hearings: With the agreement of all parties, an Administrative Law Judge may conduct an appeal of a suspension or temporary demotion jointly with an appeal of dismissal in those cases where the employee has been dismissed prior to the appeal of the suspension or temporary demotion having been heard. Upon agreement of all parties, the appeal of the suspension or temporary demotion may be reassigned from the Hearing Officer/Commissioner to the Administrative Law Judge. Cases are assigned based on the type and severity of disciplinary action imposed and subject to available funds. Specific guidelines for assigning cases, setting hearing dates, and conducting proceedings are set out in Civil Service Policy 6.8 I, Appeal Proceedings. Any provisions in that policy may be suspended where good cause has been shown and upon majority vote by the Civil Service Commission.

In any situation that arises that is not specifically addressed by the policy, reference may be made to the Uniform Administrative Procedures Act Part 3 - Contested Cases T.C.A. 4–5–301, et seq and the Tennessee Rules of Civil Procedure for guidance as to the proper procedure to follow, where appropriate and to whatever extent will best serve the interest of justice and the speedy and inexpensive determination of the matter at hand.

B. TIME

In computing any period of time prescribed or allowed by statute, rule, or order, the date of the act, event or default is not to be included. The last day of the period so computed is to be included unless it is a Saturday, a Sunday, or a legal holiday, in which event the period runs until the end of the next day which is neither a Saturday, a Sunday, or a legal holiday. When the period of time prescribed or allowed is less than seven days, intermediate Saturdays, Sundays, and legal holidays shall be excluded in the computation.

Except in regard to petitions for review under T.C.A. 4--5--315, 4--5--317, and 4--5--322, or where otherwise prohibited by law, when an act is required or allowed to be done at or within a specified time, the agency or the administrative judge may, at any time, (1) with or without motion or notice order the period enlarged if the request is made before the expiration of the period originally prescribed or as extended by previous erder; or (2) upon motion made after the expiration of the specified period, permit the act to be done late, where the failure to act was the result of excusable neglect. Nothing in this section shall be construed to allow any ex-parte communications concerning any issue in the proceedings that would be prohibited by T.C.A. 4--5--304.

C. COMMENCEMENT OF CONTESTED CASE PROCEEDINGS

Commencement of Action - An appeal of disciplinary action must be commenced by filing Notice of Appeal with the Secretary to the Commission. Said request must be made within 15 calendar days after notification by the Appointing Authority of said action.

Answer. Any employee or former employee appealing any disciplinary action taken against him shall with his notice of appeal file an answer or statement setting forth the reason said employee is appealing.

Notice of Hearing - In every contested case, except those heard by an Administrative Law Judge from the Office of the Secretary of State, a notice of hearing shall be issued by the Secretary to the Commission. The notice shall comply with T.C.A. 4-5-307 (b) Included with the notice will

Secretary to the Commission. The notice shall comply with T.C.A. 4-5-307 (b). Included with the notice will be a copy of the charge and/or determination letter from the appointing authority setting out the reasons for disciplinary action and a copy of the hearing procedures to be followed. A copy of the notice will be sent to the Department of Law. Notice of hearings set before an ALJ will be issued by the Administrative Procedures Division of the Office of the Secretary of State.

Within 20 calendar days from the receipt of the Notice of Hearing a representative of the Department of Law shall file with the Secretary to the Commission formal Charges and Specifications. The Charges and Specifications shall set out the specific act(s) or event(s) leading to the disciplinary action being taken, and shall set out the specific Civil Service Commission Rules and Regulations, the Charter Provision, Executive or Administrative Order, Department Rule, or Regulation, Ordinance, Law, or other regulation violated.

D. SERVICE OF NOTICE OF HEARING

A copy of the notice of hearing must be delivered by return receipt mail or served personally on the appellant and/or his designee. No hearing shall be held, unless otherwise specified by statute, until the expiration of 30 days from service of the notice upon all parties.

Since each employee is required to keep the Civil Service Commission informed of his current address, service of notice shall be deemed complete upon placing the notice in the mail to the last known address of such party. However, in the event of a motion for default where there is not indication of actual service on a party, the following circumstances will be taken into account in determining whether to grant the default, in addition to whether service was complete as defined above:

- 1. Whether any other attempts at actual service were made:
- Whether and to what extent actual service is practicable in any given case;
- 3. What attempts were made to get in contact with the party by telephone or otherwise; and
- 4. Whether the Commission has actual knowledge or reason to know that the party may be located elsewhere than the address to which the notice was mailed.

E. REPRESENTATION

- 1. Any party may participate in the hearing in person or, if the party is an agency of Metropolitan Government, by a duly licensed attorney.
- 2. Whether or not participating in person, any party may be advised and represented at the party's own expense by a licensed attorney.

3. Attorney General's Opinion #97-164, as adopted by the Civil Service Commission on March 10, 1998, provides that a duly licensed attorney must represent all parties, who wish to have representation in hearings before the commission. All parties in a contested case hearing shall be notified of their right to be represented by counsel. An appearance by a party at a hearing without counsel may be deemed a waiver of the right to counsel.

1 . 3.5

ga the c

Ser Was



Seth Powers

I fück bitches 🍪



Add Friend



Message



More



Works at Nashville Fire Department



Lives in Goodlettsville, Tennessee



From Goodletteville Tennessee

- . All fours includes a professional driver (local firelighter) tours includes a professional driver (local firelighter)
- All fours include a barlender
- We provide ice, cups and a cooler
- All lours are BYOB (Bring Your Own Beverage)
- · NO GLASS ALLOWED
- Tour Length; Approximately 2 hours
- All lours include a barlender
- We provide ice, cups and a cooler
- All lours are BYOB (Bring Your Own Beverage)
- . NO GLASS ALLOWED
- Tour Length: Approximately 2 hours
- · Ask about our Milliary and First Responder discount · Ask about our Milliary and First Responder discount





GALLERY









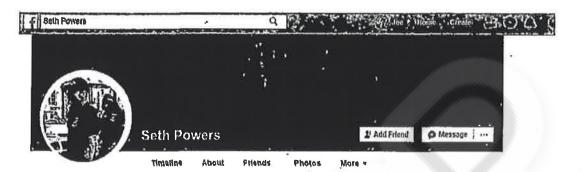




NEXT

Mours of operation

EVERYDAY 11AM TO 11PM



DO YOU KNOW SETH?

To see what he shares with itlends, send him a filend request



(intro

1 fuck bitches for a living

Selfs Powers updated his blo. February 10 at 1:01 A&I • ©

I fuck bliches for a living

Photos

Friends

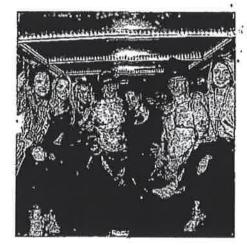
Engrale (UII) Españor Portoguês (Brasil) Français (France) - Deulgch

Tanga - Teros - Ederlang - Edicular (e., 1200) De Long - Farebook & 2010

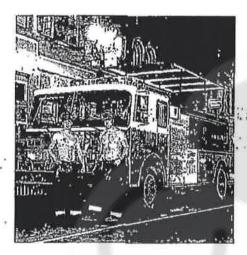
Selh Powers updated his profile picture, February 9 at 5;13 PAI • C)



Chati



Music City Party Fire Engine (MCPFE) is the original Party Fire Engine in Nashyillel We are proud of the fact that we are owned and operated by a local firefighter that was born and raised in Nashyille. The owner has watched the city grow over the years and wanted to share his rare view of the downtown scene from a fire engine perspective. Now locals and visitors alike can experience this exclusive fun way to tour, celebrate, and enjoy our unique downtown atmosphere. Be warned, this is no ordinary Fire Engine, this is a Party Fire Engine, with an emphasis on "PARTY"! Our one-of-a-kind Fire Engine is decked out with a massive professional sound and lighting system to get your party started and keep it going while on the Nashville scene. So if you are planning a bachalor or bachelorette party, birthday party, ultimate night out on the town or any other kind of party or celebration, Music City Party Fire Engine is your "Code 3" response to fun,



WHAT WE OFFER

We offer a once-in-a-lifetime experiencel

Your private group of up to 13 people will four one of the hollest cities in the world, on the hollest ride in town All fours include a professional driver (typically tirelighters) and a host/hostess (barlender). Tours are 8YOB, so bring your favorite beverages (Per City Regulations NO GLASS ALLOWED and no visible beer cans). We provide a cooler, ice and cups. Our barlender will mix your drinks at our custom bar. We also have a kitter tound system able to play your playfist or our. (NO EXPLICIT CONIENT PLEASE). All fours are approximately two hours long.

We are excited to announce Party Engine number two is on the way!

Check back for more dates to open!

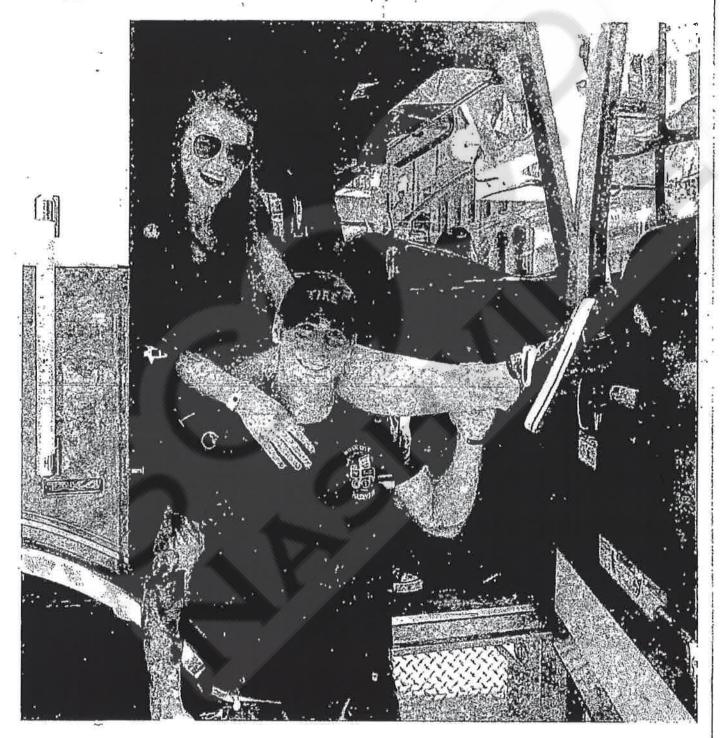
BOOK NOW INFORMATION

Monday-Thursday \$475 Friday-Sunday \$495

- · Private Tour for up to 13 people
- Private Tour for up to 13 people
- Killer sound and light system for the utilimate experience

£,1:1.

hundopowers











DAVID BRILEY MAYOR

METROPOLITAN GOVERNM

WILLIAM SWANN DIRECTOR-CHIEF LLE AND DAVIDSON COUNTY

NASHVILLE FIRE DEPARTMENT P.O. BOX 196332 NASHVILLE, TN 37219-6332 (615) 862-5421

March 11, 2019

Benjamin Powers 7004 Lama Terra Court Goodlettsville, TN 37072

Mr. Powers,

On September 18, 2018, the Nashville Fire Department became aware of a post made to your Instagram social media account with a picture of you on-duty and in uniform posed with girl on a NFD fire apparatus with her leg on your shoulder. At that time you brought in by Chief Manning and counseled on your use of social media and the public perception of such post. On January 16th, 2019 you were identified as the person in a photo on Facebook, advertising a "party Fire Engine" business wearing your department issued turn out gear pants and helmet. When researching that situation, it was also discovered that you had a Facebook account with a picture of you in uniform. Images on this account clearly identify you as working for the Nashville Fire Department and included an offensive statement. When questioned by Chief Manning, you stated that it was not your account and your brother was trying to get it taken down. On February 10, 2019, another Facebook page was found: again you were in NFD attire and an offensive statement was listed. When questioned a second time, you gave no indication of why you failed to inform someone in your chain of Command of these Facebook pages. These posts were inappropriate and offensive to members of the public and your co-workers, (see attached documentation).

Based on this information, you are alleged to have violated the following rules:

- Nashville Fire Department Operational Procedures and Guidelines Social Media Policy Section 11.2
- · Adherence to Policy & Rules of the Metropolitan Government
 - Civil Service Rule 6.7
 - Conduct Unbecoming an Employee of the Department
 - Any failure of good behavior which reflects discredit upon himself, the department and/or the Metropolitan Government.
- Violation of any written rules, policies or procedures of the department in which the employee is employed.
- Metropolitan Government of Nashville & Davidson County Information Security Policy- Acceptable
 Use Of Information Technology Assets Policy

ACCREDITED SINCE 1999

A disciplinary meeting is scheduled for Thursday March 14 at 1:00 p.m. in the Gold conference room located at Nashville Fire headquarters. The purpose of this meeting is to allow you or your representative to present your account of the events and review the information regarding this incident. The meeting is informal. You may present statements, witnesses, or any other information in regard to the charges. Attendance and participation by persons other than the panel members, you, your representative, and witnesses shall be at the discretion of the panel chairperson. You can obtain any documents and/or statements made by witnesses regarding the charges prior to the meeting, unless prohibited by law.

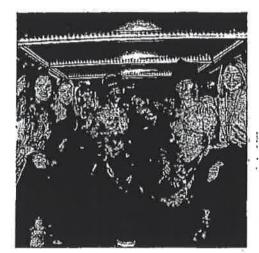
If you wish to waive your right to this meeting, you must notify Jamie Summers of the Nashville Fire Human Resources Division (615-862-5242) prior to the meeting and no later than Tuesday March 12, 2019. A decision will be made within ten (10) calendar days after the meeting or after receiving notification of your request to waive the meeting.

Sincerely, Lenny Mannang Sn.

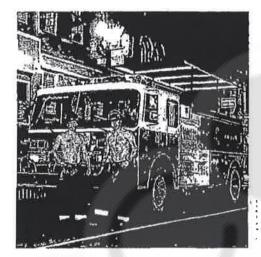
Lenny Manning

Pire Deputy Director - Operations

cc: Jamie Summers, Human Resources Manager Personnel File



Music City Party Fire Engine (MCPFE) is the original Party Fire Engine in Nashvillei. We are proud of the fact that we are owned and peral by a local firefighter that was born and raised in Nashville. The owner has watched the city grow over the years and wanted to share his rare view of the downtown scene from a fire angine perspective. Now locals and visitors alike can experience this exclusive fun way to tour, celebrate, and enjoy our unique downtown atmosphere. Be warned, this is no ordinary Fire Engine, this is a Party Fire Engine, with an emphasis on "PARTY"! Our one-of-a-kind Fire Engine is decked out with a massive professional sound and lighting system to get your party started and keep it going while on the Nashville scene. So if you are planning a bachelor or bachelorette party, birthday party, ultimate night out on the town or any other kind of party or celebration, Music City Party Fire Engine is your "Code 3" response to fun.



WHAT WE OFFER

We offer a once-in-a-lifetime experience

Your private group of up to 13 people will four one of the hottest cities in the world, on the hottest ride in fown! All tours include a professional driver (hypically lifelighters) and a host/hostess (bartender). Tours are BYOB, so bring your favorite beverages (Per City Regulations NO GLASS ALLOWED and no visible beer cons). We provide a cooler, ice and cups. Our bartender will mix your drinks at our custom bor. We also have a latter sound system able to play your playlist or ours. (NO EXPLICIT CONTENT PLEASE). All fours are approximately two hours long.

We are excited to announce Party Engine number two is on the

Check back for more dates to open!

BOOK NOW INFORMATION

Monday-Thursday

Friday-Sunday \$495

- * Private Tour for up to 13 people
- Killer sound and light system for the ultimate experienceller sound and light system for the ultimate experience

- All tours includes a professional driver (local firefighter)All tours includes a professional driver (local firefighter)
- All fours include a bartender
- We provide ice, cups and a cooler
- * All fours are BYOB (Bring Your Own Beverage).
- NO GLASS ALLOWED
- Tour Length: Approximately 2 hours in
- All tours include a bartender
- We provide ice, cups and a cooler
- . All tours are BYOB (Bring Your Own Beverage)
- NO GLASS ALLOWED
- '. Tour Length: Approximately 2 hours
- · Ask about our Military and First Responder discount · Ask about our Military and First Responder discount







PREVIOUS



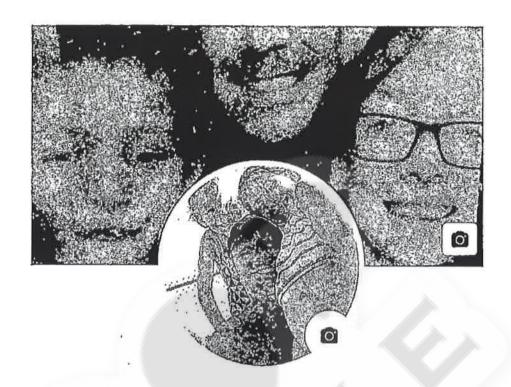




NEXT

OPERATION

EVERYDAY **11AM TO 11PM**



Seth Powers

Q

Add a short bio to tell people more about yourself.

+ Add Bio

Add to Story Edit Profile Activity Log More

Went to East Knox High School

justaguyhundo v





213 posts

1,861 Followers

996

Edit Profile

Following

Nashville Drill Sgt A3A3... more



New



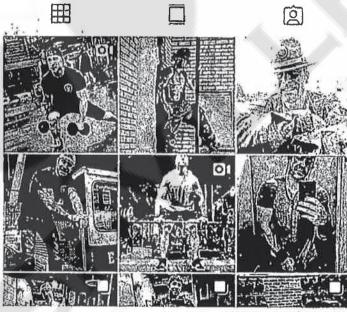
gymisshh







ARMY STUFF FIRE DEPT'S...







111

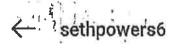


0



<





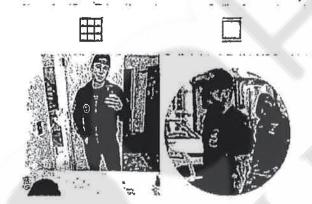






2 1 5
posts followers following

Seth Powers





Seth Powers

My wife left me!!



Add Friend



Message



More





Divorced

Joined January 2019



Seth Powers

I fuck bitches 🍪



Add Friend



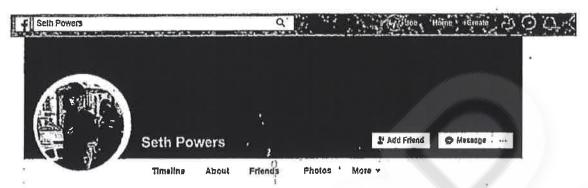
Message-

More





From Goodlettsville Tennessee



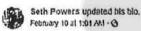
DO YOU KNOW SETH?

To see what he shares with friends, send him a friend request.



Intro

I fuck biltchee for a living



I fuck bitches for a living

Photos

Friends

English (US) • Espsilol • Porluguês (Brasil) • Françols (France) • Deulsch

Photographical Advantage Advantage Cooker Asses

Facebook & 2019





Chati

Time

Feb 3, 2019, 11:05 AM

IP Address

2600:1:c320:94f2:3cdf:f742:1636:a2f8

1:3

Site

www.facebook.com

Login

Time

Jan 31, 2019, 1:30 AM

IP Address

2600:1702:2bd0:27a0:e4c5:d6d5:d1fd:ae49

Site

www.facebook.com

Log Out

Time

Jan 16, 2019, 6:51-AM

IP Address

14.141.97.177

Site

www.facebook.com

Login

Time

Dec 13, 2018, 4:56 PM

IP Address

2600:1:c301:afd8:e907:c45d:c83e:217

Site

www.facebook.com

Login

Time

Sep 23, 2018, 2:40 AM

IP Address

2601:481:c201:e428:cc9b:64b6:b0d9:9fdd

Site

www.facebook.com

Login

Time

Jul 12, 2018, 3:32 AM

IP Address

2600:1:c32a:3d3f:787d:32b4:37d:bfa3

Site

www.facebook.com



Seth Powers logged in on www.facebook.com.

//

IP Address

2600:1702:2bd0:27a0:e4c5:d6d5:d1fd:ae49

· Hidden from Timeline

January 16, 2019



Seth Powers logged out of www.facebook.com. IP Address 14.141.97.177

· Hidden from Timeline

December 13, 2018



Seth Powers logged in on www.facebook.com. IP Address 2600:1:c301:afd8:e907:c45d:c83e:217

· Hidden from Timeline

September 23, 2018



Seth Powers logged in on www.facebook.com. IP Address 2601:481:c201:e428:cc9b: 64b6:b0d9:9fdd

· Hidden from Timeline

July 12, 2018



Seth Powers logged in on www.facebook.com.



<



Facebook Help Team Tuesday, January 15, 2019 at 7:16 PM HI Seth,

We'll let you know when we've reviewed the profile you reported for pretending to be someone they're not. If it goes against one of our Community Standards, we'll remove it or follow up with the profile owner directly.

Thanks,
The Facebook Team



Wednesday, January 16, 2019 at 7:40 PM:HI Seth.

Thanks for letting us know about the profile you reported for pretending to be someone they're not.

We removed the profile because it goes against our Community Standards for identity and privacy. We let the person who owns the profile know that it has been removed, but not who reported it.

Thanks,
The Facebook Team

Thanks,

Jeremy



13

'Facebook Help Team Wednesday, January 16, 2019 at 6:51 AM HI Seth.

It looks the account with name Seth Powers has been disabled for pretending to be someone else, which goes against our Community Standards.

We understand that you may not be familiar with our Community Standards, so we encourage you to learn more:

https://www.facebook.com/communitystandards#us lng-your-authentic-identity

If you think we made a mistake, please reply to this message with an ID or other documents that contain your photo, name and date of birth.

You can learn more about the types of IDs and documents we can use to confirm your identity in the Help Center:

https://www.facebook.com/help/159096464162185 /?ref=cr

When you send us a copy of your ID, we'll keep it for more than 30 days, but no more than one year, unless you opt out. This helps us improve our automated systems for detecting fake IDs and related abuse. Your ID will not be visible on Facebook.

To learn more about what happens to your ID when you send it to Facebook, visit the Help Center:

if you turn this option off, the copy of your ID will be deleted within 30 days of submission or when you turned this option off.

Thanks, The Facebook Team

Thanks,

Arnold



Your reply
Wednesday, January 16, 2019 at 4:24 PM
Benjamin seth powers
Attachments
20181129_194458.jpg



Wednesday, January 16, 2019 at 5:02 PM Hi Seth,

Thanks for sending us something from our ID list.
Unfortunately, we can't see enough information to
confirm your identity. This may be because the photo
or scan that you sent us:

- Was too blurry to read, the info
- Was too dark or wasn't taken in a well-lit room
- Was missing the required info or had the required info covered up

The info we need to see is:

- Your name
- . Vour nhoto

If you'd like to learn more about the types of things that we can use to confirm your identity, please visit the Help Center:

https://www.facebook.com/help/159096464162185 /?ref=cr

Once we confirm your identity we'll help you move forward. Thanks for working with us to sort this out.

Thanks,

Crizza Myer



Your reply Wednesday, January 30, 2019 at 10:38 PM

Attachments 20190130_223819.jpg



Wednesday, January 30, 2019 at 11:08 PM Hi Seth,

it looks like your account was disabled by mistake. We're sorry for the inconvenience. You should now be able to log in.

If you have any issues getting back into your account, please let us know by responding to this message.



Thursday, February 21, 2019 at 2:35 PM

Thank you for getting my account back. Before I lost access to my account I had reported a couple fake profiles that someone had made of me. Thankfully they have been taken down, but since that person had put my job. Nashville fire department on the fake profiles. My work is trying to give me disciplinary action for something I did not create. Is there any documentation or proof that you can provide to show that the accounts were not part of this profile and not my actions



Thursday, February 21, 2019 at 2:47 PM HI Seth,

Thanks for contacting us. It looks like the Facebook account that you're trying to get into hasn't been disabled. If you're having trouble logging into your Facebook account, you can try:

- Resetting your password
- Logging in with your username or phone number
- Logging in with another email account

If you're still having trouble, please visit the Help Center for more troubleshooting tips:

https://www.facebook.com/help/283100488694834 /?ref=cr

Thanka



Thursday, February 21, 2019 at 2:58 PM
No this account was previously disabled. Before it
got disabled I reported 2 other fake accounts. Is
there any documentation or proof u can send me that
shows this is my only fb profile and the ones i
reported were fake. For my jobs sake



Thursday, February 21, 2019 at 4:17 PM HI Seth,

Thanks for contacting us. It looks like the Facebook account that you're trying to get into hasn't been disabled. If you're having trouble logging into your Facebook account, you can try:

- Resetting your password
- Logging in with your username or phone number
- Logging in with another email account

If you're still having trouble, please visit the Help Center for more troubleshooting tips:

https://www.facebook.com/help/283100488694834 /?ref=cr

Thanks,

Crizza Myer

- Logging in with another email account

if you're still having trouble, please visit the Help Center for more troubleshooting tips:

https://www.facebook.com/help/283100488694834 V?ref=cr

Thanks,

Crizza Myer



8

Your reply

Thursday, February 21, 2019 at 4:48 PM Seriously? Are u even reading my responses?



Your reply

Today at 2:46 AM Hello I need assistance



Your response

Write your reply here...

Choose File No file chosen

Account Reactivated

Time:Jan 30, 2019, 11:08 PM

Account Reactivated

Time:Jan 30, 2019, 11:08 PM

Account Disabled

Time:Jan 16, 2019, 6:51 AM

Generated by Seth Powers on Monday, March 11, 2019 at 1:45 Pl



61. PF0408- 13,251.25

Metropolitan Government of Nashville and Davidson County

Rating Period

EMPLOYEE PERFORMANCE EVALUATION

Employee Name: Benjamin S Powers

Title/Department: Firefighter 2

Employee #: 621693

Supervisor Name/Title: Patrick I hunt/Capt.

Evaluation Type: Annual O Probationary/Work Test O Targeting O Other

Performance Rating Definitions

- 1 Needs Improvement: Performance fails to meet the minimum performance standards of the position.
- 2 Successful: Performance meets the standards of the position.
- 3 Exceptional: Performance is significantly above the performance standards of the position.

A.MAJOR JOB RESPONSIBILITIES: List the responsibility, rate the performance level, and provide comments to support your ratings. *NOTE: A rating of 1 or 3 must be documented

Responsibility	1	2	3	Comments
1. Firefighting and rescue operations	0	0	•	F/F Powers has high competence in rescue operations and is equally capable in his firefighting duties.
2. General station and equipment maintenance	0	•	0	
3. Training and continuous education programs, to include relief driving	0	•	0	
4. First responder medical activities	0	0	•	F/F Powers is proficient with his EMT skills and is proactive on the scene.
5. Relief apparatus driving and scene operations (if applicable)	0	•	0	
6.	0	0	0	
7-	0	0	0	
8.	0	0	0	
9.	0	0	0	
10.	0	0	0	

Competency	1	2	3	Comments
1. Adaptability/Figxibility: Displays willingness and ability to adjust to change in assignments, schedule, rules, and procedures in a timely manner.	0	•	0	
2. Communications: Receives and relays information in a clear, accurate, and respectful manner. Conveys information effectively through verbal and written means.	0	•	0	
3. Customer Relations: Displays positive, cooperative, and respectful approach when interacting with customers and focuses on meeting customer needs and gaining results.	0	•	0	
4. Dependability: Takes personal responsibility for the quality and timeliness of work, and achieves results with little oversight.	0	•	0	
5. Initiative: Demonstrates appropriate independent action, self-application, self-improvement, and innovation to achieve results and to address gaps and issues with supervisory guidance.	0	•	0	
6. Teamwork/Peer Relations: Displays a positive, cooperative, and respectful approach when Interacting with other employees. Demonstrates ability to work effectively in a team to achieve results.	0	0	•	F/F Powers has a positive attitude and is very respectful with all outher employees.

C. EXPECTED WORK BEHAVIORS: Mark the appropriate rating and provide comments if needed. Comments must be provided for a rating of Unacceptable.

Behavior	Acceptable	Unacceptable Comments
1. Attendance	•	0
2. Compliance with Rules	•	0
3. Observance of Work Hours	•	0

a rating of Unacceptable for any of the above items constitutes an overal	li Linsatisfactory evaluation and regulees the following:
Documentation of specific problem(s) and corrective and/or discipli	
Authorization of next level manager.	Signature
Authorization of departmental/Metro Human Resources office.	Signature

D. GOAL ACHIEVEMENT (This section should be completed only if you used the Performance Plan form to set goals at the beginning of the rating period. This is intended for developmental purposes and is not calculated as part of the performance rating.) Indicate whether or not the employee achieved their performance and developmental goals for the year. Provide comments if needed.

Goal	Successful	Ongoing	Comments
a a st.	0	0	
de .	0	0	
3.	0	0	
Ja	0	0	
5.	0	0	
ADDITIONAL COMMENTS:			
PERFORMANCE RATINGS: The av	erage of each se	ction and list i	in the designated area. The Overall rating is the average
of the Section A and B ratings.	— o megan ni jara di i ana		
Section A	2.4 Sec	ction B 2.	2 Overall 2.3

This form acknowledges that my supervisor and I met and disucssed this performance evaluation. My signature does not imply that I agree with these evaluation results.

Employee's Signature Signature Palmin Hurt Date 7-17-2018

Reviewer's Signature Under Signature Date 7-20-18

Director's Signature (optional)

(0). PF0401 - 61,542.15



Performance Evaluation Form

Plan Start Date_ 7.16.16
Plan End Date_ 7.16.17

	621693	ľ	rian end Date,
intitoyee 2005	Employee# FORTHON	Title/Department FIRE FIGHTER 2 SU	anacción
Howers, Benjamins,	Rator's Title	Fiscal Year	PPRESSION
Jimmy R Coreenwood	Captain	17	
ogram Purpose Statement IE PURPOSE OF THE BASIC FIRE/RESCUI RODUCTS TO THE CITIZENS AND VISITOR VOLVEMENT UPON ARRIVAL.			
ipervisors are encouraged to ensure each em	ployee understands the department's mil	ssion and the program(s) I	ne/she works in.
. Performance Measures an ate each employee either (1) Unacceptat	d Major Job Responsibilit ole; (2) Acceptable; (3) Commendable	ties	
. Firefighting and rescue opera			3
General station and equipme			2
Training and continuous educ			3 2
. Relief apparatus driving and s			2
. First responder medical activi	ties (EMT's only).	43. /	3
		Average Rating	2.6
upervisor's Comments		******	
Rate each employee either (1) Unacceptal I. Accepts Change		le; (4) Exemplary; or (N	A) Not Applicable.
. Accepts Responsibility and			ユ
. Constructive Use of Work	Time		2
. Customer Relations			3
. Peer Relations/Teamwork			3
. Communications			3
'. Initiative			2
 Job-related Decision-making 	ng		3
. Knowledge of Work			3
0. Planning/Organization			2
1. Quality of Work			3
2. Compliance with Safety			3
Cumulative total for employees	with supervisory responsit	oilities	n/a
		Average Rating	3.6
Supervisor's Comments			
	Improving in m		S. I
Bolein he will	only get bett	-e(,	

C. Work Behavior Expectations
Employees are expected to comply with all Metro/Civil Service rules, policies, and procedures and all department rules and regulations, including attendance and observance of work hours.

 Compliance with Rules 	Acceptable Unacceptable*
 Attendance 	Acceptable 🗹 Unacceptable*
 Observance of Work Hours 	Acceptable Unacceptable*
*A rating of Unacceptable for any of the above items	
 Documentation of specific problem(s) and correct Authorization of next level manager. 	Signature
☐ Authorization of departmental/Metro Human Rese	ources office. Signature
Vary Frai Daufamana Bassiana	
Year-End Performance Review Employee's Comments	
Employee's Comments	
Supervisor's Comments	
Authorities and the second sec	
	Average Betting from A and B combined (6077)
	Average Rating from A and B combined 2
D O	9.0
☐ Conversation # 1 (see form) occurred on	Development Plans (see form) were made and tracked.
This form acknowledges that my suponiege	r and I met and discussed this performance evaluation.
My signature does not imply that I agree wit	
ny digitali o dood not imply that i agree the	
Supervisor's/Rater's Signature	R Maconward Date 6-19-17
Reviewer's Signature H. M. Bu	Date 7-7-17
2 170	
Employee's Signature	Date (0 - 19 - 17
Director's Signature & T. White by	u Cb Date 7.18.17
	0
Perform	nance Rating Definitions
Performance does not meet minimum acceptable	P) will be initiated for any individual performance rating of Unacceptable. • standards, expeciations, and requirements of the job, or is below what can be
expected of average performance	
 Employee requires a high level of supervision or Improvement is necessary to meet desired level 	
(2) Acceptable	or performance
 Performance meets acceptable standards, expe- 	
	rualified, experienced employee performing in this position
 Employee is expected to continue development (3) Commendable 	of new knowledge, skills, or abilities
	regularly exceeds them, and shows initiative in additional assignments
 Successfully completes all responsibilities, even 	for projects that require versatile skills
Employee strives to grow professionally through	development activities
(4) Exemplary Performance is noticeably exceptional: guistand	ing performance is clearly evident; performance is at a level that is a "stretch"
	and anticipate problems, and employee takes appropriate independent action
Performance requires little or no supervision to p	produce exceptional results
 (NA) Not Applicable This rating can be used when the category does 	a mail annihi da dha manalarranda lab di alba an di marrita dan manada mate dha
	s not apply to the employee's top didies of it may be the soon to rate the

67. PF0406 - 58, 679.85

Performance Evaluation Form

Plan Start Date 7/16/2015 Plan End Date 7/16/2016

Employee Name Benjamin Powers	Employee # 621693	Title/Department FIRE FIGHTER 2 SUPPRESSION
Rater's Name ROW Greenwood	Rater's Title	Fiscal Year 16
Program Purpose Statement THE PURPOSE OF THE BASIC FIRE/RE PRODUCTS TO THE CITIZENS AND VIS INVOLVEMENT UPON ARRIVAL.	SCUE/HAZARD RESPONSE PROGRA	AM IS TO PROVIDE FIRE SUPPRESSION AND RESCUE THEY CAN HAVE FIRES CONFINED TO AREA OF

A.	Perf	ormance	Measures	and Ma	jor Job	Responsibilities
----	------	---------	----------	--------	---------	------------------

Training and continuous education programs. Relief apparatus driving and scene operations.	3
5. First responder medical activities (EMT's only).	2
Average Rating	24

Supervisor's Comments

B. Achieving Program Results: Expectations for All Employees

Rate each employee either (1) Unacceptable; (2) Acceptable; (3) Commendable; (4) Exemplary; or (NA) Not Applicable. Accepts Change 2 Accepts Responsibility and Accountability 2. Constructive Use of Work Time 3. **Customer Relations** 4. 5. Peer Relations/Teamwork 3 Communications 6. 3 Initiative 7. Job-related Decision-making 8. Knowledge of Work 9. 3 Planning/Organization 10. Quality of Work 11. Compliance with Safety Cumulative total for employees with supervisory responsibilities 30 Average Rating

Supervisor	's	Comments	

C. Work Behavior Expectations Employees are expected to comply with all Me	tro/Civil Sacrica culas calloina	and make	والمستعدد والمستعدد المستعدد ا	and a
regulations, including attendance and observar	nce of work hours.	and proce	coures and all department rules	and
Compliance with Rules	P Acceptable		Inacceptable*	
Attendance	Acceptable		Inacceptable*	
Observance of Work Hours			inacceptable*	
*A rating of Unacceptable for any of the above Documentation of specific problem(s) and c	Items requires the following:	tione taker		
Authorization of next level manager.	Signature			
☐ Authorization of departmental/Metro Human	Resources office. Signature_	- 4		
Year-End Performance Review				
Employee's Comments				
Supervisor's Comments				
	Average Rating fr	om A a	nd B combined @2	12.0
Conversation #1 (see form) occurred on	Developr	nent Plans	s (see form) were made and tra	cked.
This form acknowledges that my supervision	isor and I met and discus	sed this	performance evaluation.	
My signature does not imply that I agree	with these evaluation res	sults.		
Supervisor's/Rater's Signature 2mg	R heemood	gn.	Date 6 - 22 - 16	
Reviewer's Signature 4 m. By		/	Date 6-30-16	
Reviewer's Signature				_
Employee's Signature 3 - F			_ Date 6 - 30 - 10	5
Director's Signature D.T. White	box CB		Date 7:15:16	
Cirector's Signature - 1 1.1 CX 10.70	my us	-	Date	
Per	formance Rating Definition	ns		
(1) Unacceptable: A Performance Improvement Pla • Performance does not meet minimum acce	n (PIP) will be initiated for any indi- ptable standards, expectations, an	vidual perfo d requirem	rmance rating of Unacceptable.	i he
expected of average performance			The of the job, of its bolon what ball	Va
 Employee requires a high level of supervisit 		rk results		
 Improvement is necessary to meet desired. (2) Acceptable 	lavel or performance			
 Parformance meets acceptable standards, 	expectations, and requirements			
 Performance contributes what is expected a 	of a qualified, experienced employe	e performir	ng in this position	
 Employee is expected to continue developm (3) Commendable 	nent of new knowledge, skills, or al	biliti es		
 Consistently meets standards and expectati 	ions, regularly exceeds them, and	shows initia	tive in additional assignments	
 Successfully completes all responsibilities, Employee strives to grow professionally thro 		itile skills		
(4) Exemplary	•			
Performance is noticeably exceptional; outs	standing performance is clearly evid	dent; perfor	mance is at a level that is a "stretch	*
 Performance shows exceptional initiative to Performance requires little or no supervision 		employee	takes appropriate independent activ	אכ
(NA) Not Applicable				
 This rating can be used when the category employee's performance in this category 	does not apply to the employee's	job duties o	r It may be too soon to rate the	

C. Work Behavior Expectations Employees are expected to comply with all Meti	ro/Civil Service rules, policies,	and procedures and all department rules and
regulations, including attendance and observange Compliance with Rules	CB OF WORK HOURS. Acceptable	□ i inconntable*
Attendance	☐ Acceptable	☐ Unacceptable* ☐ Unacceptable*
Observance of Work Hours	☑ Acceptable	☐ Unacceptable*
"A rating of Unacceptable for any of the above it	tems requires the following:	
 Documentation of specific problem(s) and co Authorization of next level manager. 	rrective and/or disciplinary ad	tions taken.
Authorization of hext level manager. Authorization of departmental/Metro Human	Signature_ Resources office. Signature	
Year-End Performance Review Employee's Comments		
Employee's Comments		
Supervisor's Comments		
	Average Pating fo	rom A and B combined @ 3.U
	Average reading in	on A and B combined 4829 A
Conversation # 1 (see form) occurred on	Developr	ment Plans (see form) were made and tracked.
This form acknowledges that my superv	isor and I met and discus	sed this performance evaluation.
My signature does not imply that I agree	with these evaluation res	sulta.
Supervisor's/Rater's Signature 9 mg	R Theenwood	9n. Date 6-22-16
Int and R.		91. Date 6-22-16 Date 6-30-16
Reviewer's Signature 41 M.		
Employee's Signature 3 - F		Date 6 - 30 - 6
Disastaria Simastum D. T. 11 Mr. to	bry CB	Date 7:15:16
Director's Signature 9.T. White	by US	Date 7 10 10
Peri	formance Rating Definition	ons
(1) Unacceptable: A Performance Improvement Plan		vidual performance rating of Unacceptable. d requirements of the job, or is below what can be
expected of average performance		·
 Employee requires a high level of supervision Improvement is necessary to meet desired in 		rk results
(2) Acceptable	svai oi panomiatica	
 Performance meets acceptable standards, e 		
 Performance contributes what is expected o Employee is expected to continue developm 		
(3) Commendable	•	
 Consistently meets standards and expectation Successfully completes all responsibilities, etc. 		
Employee strives to grow professionally thro		ashid avilla
(4) Exemplary	andina nadamenna ir alaasis kui	dant madannama is ut a lavat tat is a Vatatah
		dent; performance is at a level that is a "stretch" I employee takes appropriate independent action
 Performance requires little or no supervision 		
(NA) Not Applicable This rating can be used when the category	does not apply to the employee's	job duties or it may be too soon to rate the
employee's performance in this category	man a stand military and stand distribution in the second	•





Performance Evaluation Form

Plan Start Date <u>7/16/2014</u> Plan End Date <u>7/16/2015</u>

Employee Name	Employee #	Title/Department
Powers, Benjamin	621693	FIRE FIGHTER 2 SUPPRESSION
Rater's Name Ray Greenwood	Rater's Title	Fiscal Year
Program Purpose Statement THE PURPOSE OF THE BASIC FIRE/RI PRODUCTS TO THE CITIZENS AND VI INVOLVEMENT UPON ARRIVAL.	ESCUE/HAZARD RESPONSE PROG SITORS WITHIN OUR COMMUNITY	SRAM IS TO PROVIDE FIRE SUPPRESSION AND RESCU SO THEY CAN HAVE FIRES CONFINED TO AREA OF ment's mission and the program(s) he/she works in.

PRODUCTS TO THE CITIZENS AND VISITORS WITHIN OUR COMMUNITY SO THEY CAN HAVE FIRES CONTINUOUS MENT UPON ARRIVAL.	
Supervisors are encouraged to ensure each employee understands the department's mission and the program(s)	he/she works in.
A. Performance Measures and Major Job Responsibilities	
Rate each employee either (1) Unacceptable; (2) Acceptable; (3) Commendable; or (4) Exemplary. 1. Firefighting and rescue operations.	3
General station and equipment maintenance.	2
Training and continuous education programs.	
Relief apparatus driving and scene operations.	2
5. First responder medical activities (EMT's only).	
Average Rating	2.2
Supervisor's Comments	
CE Power's Has a lot of Potential to	become
FF Power's Has a lot of Potential to Good in all Areas of the Job. And I will become motivated to.	think he
B. Achieving Program Results: Expectations for All Employees Rate each employee either (1) Unacceptable; (2) Acceptable; (3) Commendable; (4) Exemplary; or (1)	NA) Not Applicable.
1. Accepts Change	3
Accepts Responsibility and Accountability	2
3. Constructive Use of Work Time	2
4. Customer Relations	3
5. Peer Relations/Teamwork	2
6. Communications	2

1.	Accepts Change	3
2.	Accepts Responsibility and Accountability	2
3.	Constructive Use of Work Time	2
4.	Customer Relations	3
5.	Peer Relations/Teamwork	2
6.	Communications	2
7.	Initiative ·	2
8.	Job-related Decision-making	2
9.	Knowledge of Work	2
10.	Planning/Organization	a
11.	Quality of Work	3
12.		a
Cun	nulative total for employees with supervisory responsibilities	27
	Average Rating	a.25

Supervisor's Comments

C. Work Behavior Expectations Employees are expected to comply with all Metro	MCivit Service rules, policies,	and procedures and all o	lepartment rules and
regulations, including attendance and observance Compliance with Rules		[m] Limanana Amin	(_ +
Attendance	AcceptableAcceptable		
Observance of Work Hours		☐ Unacceptable☐ Unacceptable	
*A rating of Unacceptable for any of the above ite	oms requires the following:		l o
☐ Documentation of specific problem(s) and cor	rective and/or disciplinary ac		
 ☐ Authorization of next level manager. ☐ Authorization of departmental/Metro Human F 	_Signature Resources office. Signature		
Year-End Performance Review Employee's Comments			
Supervisor's Comments			
I have had several And I Expect to	talks with	th FF P	owers
And I Expect to	see these 1	vumbers or	Evaluation
to become Higher.			
	Average Rating fr	rom A and B com	man 2000
	Average Raung II	Ulii A aliu b culli	ollied
☐ Conversation # 1 (see form) occurred on	☐ Develop	ment Pians (see form) we	ere made and tracked.
This form acknowledges that my supervis			e evaluation.
My signature does not imply that I agree			ratio at
Supervisor's/Rater's Signature gm	R Morenwood	9). Date 6	- 27 - 15
Reviewer's Signature 4.m. By		/	-27-45
Employee's Signature B	P	Date (g	27-15
Ch + 1, 1, 1, 1	by Cb		1.2.15
Director's Signature 1[.1. White	My CD	Date	- 01
Perf	ormance Rating Definition	ons	***
(1) Unacceptable: A Performance Improvement Plan Performance does not meet minimum accept			
expected of average performance Employee requires a high level of supervision	t or conintance to consemplish wa	arte empretto	
 Employee requires a high level of supervision Improvement is necessary to meet desired le 		iik leadita	
(2) Acceptable Performance meets acceptable standards, ex	martations and requirements		
 Performance contributes what is expected of 	a qualified, experienced employ		n
 Employee is expected to continue developmendable 	ent of new knowledge, skills, or a	ibilities	
 Consistently meets standards and expectation 			l assignments
 Successfully completes all responsibilities, ex Employee strives to grow professionally through 		atte skilis	
(4) Exemplary	-		
Performance is noticeably exceptional; outstr Performance shows exceptional initiative to performance.	anding penormance is clearly evi plan and anticipate problems, and	ident; perromance is at a le d employee takes appropria	ver man is a "stretch" te independent action
 Performance requires little or no supervision 		The second secon	
 (NA) Not Applicable This rating can be used when the category of 	ices not apply to the employee's	job duties or it may be too :	soon to rate the
employee's performance in this category		-	



Metropolitan Government of Nashville & Davidson County

1090 PS0403 \$50,249.17

Performance Evaluation Form

Plan Start Date <u>7/16/2013</u> Plan End Date <u>7/16/2014</u>

	Eng 3-B D-29			
Powers, Benjamin S.	621693	Title/Department FIRE FIGHTER 2 SUPPRESSION		
Rater's Name	Rater's Title	Fiscal Year		

Program Purpose Statement

Supervisor's Comments

THE PURPOSE OF THE BASIC FIRE/RESCUE/HAZARD RESPONSE PROGRAM IS TO PROVIDE FIRE SUPPRESSION AND RESCUE PRODUCTS TO THE CITIZENS AND VISITORS WITHIN OUR COMMUNITY SO THEY CAN HAVE FIRES CONFINED TO AREA OF INVOLVEMENT UPON ARRIVAL.

Supervisors are encouraged to ensure each employee understands the department's mission and the program(s) he/she works in.

A. Performance Measures and Major Job Responsibilities

Rate each employee either (1) Unacceptable; (2) Acceptable; (3) Commendable; or (4) Exemplary.

1. Firefighting and rescue operations.

2. General station and equipment maintenance.

3. Training and continuous education programs.

4. Relief apparatus driving and scene operations.

5. First responder medical activities (EMT's only).

Average Rating

B. Achieving Program Results: Expectations for All Employees

Rate each employee either (1) Unacceptable; (2) Acceptable; (3) Commendable; (4) Exemplary; or (NA) Not Applicable.

1,	Accepts Change	13
2.	Accepts Responsibility and Accountability	3
3.	Constructive Use of Work Time	3
4.	Customer Relations	3
5.	Peer Relations/Teamwork	3
6.	Communications	Z
7.	Initiative	3
8.	Job-related Decision-making	7,
9.	Knowledge of Work	
10.	Planning/Organization	3
11.	Quality of Work	3
12.	Compliance with Safety	3
Cun	nulative total for employees with supervisory responsibilities	30
	Average Rating	3

Supervisor's Comments

and the

Emplo	vork benavior Expectations yees are expected to comply with all Met	ro/Civil Service rules, policies,	and procedures and all department rules and
regulat	tions, including attendance and observar	ice of work hours.	
	Compliance with Rules	Acceptable	☐ Unacceptable*
•	Attendance	Acceptable	☐ Unacceptable*
	Observance of Work Hours		□ Unacceptable*
"A ratir	ng of Unacceptable for any of the above in cumentation of specific problem(s) and or	items requires the following:	inne taken
Aut	horization of next level manager.	Signature	ions taken.
☐ Aut	horization of departmental/Metro Human	Resources office. Signature_	
Year.	End Performance Review		
	yee's Comments		
	,200	- 1000000000000000000000000000000000000	
Superv	risor's Comments		
			om A and B combined 3
lly sig	orm acknowledges that my supervinature does not imply that I agree sors/Rater's Signature	isor and I met and discuss with these evaluation res	sed this performance evaluation. ults. Date
Review	er's Signature	and a	Date 0 / 7 / / c
mploy	ee's Signature Sen and S.	Burn	Date 47-17-14
	Dial 1.75 to k	w m	= Elanlul
i rec tor	's Signature KICK White K	99	Date 5/20/14
	Per	formance Rating Definition	ns
) Una	cceptable: A Performance Improvement Plan	n (PIP) will be initiated for any Indiv	idual performance rating of Unacceptable.
•		otable standards, expectations, and	requirements of the job, or is below what can be
	expected of average performance Employee requires a high level of supervision	on or assistance to accomplish work	k results
	Improvement is necessary to meet desired I		a conveniente a mar (A. T. A.).
) Acc	ceptable		
	Performance meets acceptable standards, a Performance contributes what is expected of		e performing in this position
	Employee is expected to continue developm		
) Cor	mmendable		
•	Consistently meets standards and expectati Successfully completes all responsibilities, a		
-		tion for anionic that remiiles the "	nia dvilla
	Employee strives to grow professionally thro		
) Exe	Employee strives to grow professionally through	ough development activities	
i) Exe	implary Performance is noticeably exceptional; outsi	ough development activities tanding performance is clearly evid	ent; performance is at a level that is a "stretch"
f) Exe	emplary Performance is noticeably exceptional; outsi Performance shows exceptional initiative to	ough development activities tanding performance is clearly evid plan and anticipate problems, and	ient; performance is at a level that is a "stretch" employee takes appropriate independent action
	emplary Performance is noticeably exceptional; outsi Performance shows exceptional initiative to Performance requires little or no supervision	ough development activities tanding performance is clearly evid plan and anticipate problems, and	
(*)	emplary Performance is noticeably exceptional; outsi Performance shows exceptional initiative to	ough development activities tanding performance is clearly evid plan and anticipate problems, and to produce exceptional results	employee takes appropriate independent action



Metropolitan Government of Nashville & Davidson County

Carport

Performance Evaluation Form

Plen Start Date 11/16/12
Plen End Date 11/16/13
F 03-R D-29

	E 03-B D-29		
Employee Name Powers, Benjamin S.	Employee # 621693	Title/Department FIRE FIGHTER 2 SUPPRESSION	
Rater's Name	Rater's Title	Fiscal Year 13	
		GRAM IS TO PROVIDE FIRE SUPPRESSION AND RESCUE SO THEY CAN HAVE FIRES CONFINED TO AREA OF	

Supervisors are encouraged to ensure each employee understands the department's mission and the program(s) he/she works in.

Rate each employee either (1) Unacceptable; (2) Acceptable; (3) Commendable; or (4) Exer	nplary.
1. Firefighting and rescue operations.	4
2. General station and equipment maintenance.	3
3. Training and continuous education programs.	3

4. Relief apparatus driving and scene operations.

5. First responder medical activities (EMT's only).

3

Average Rating 3,20

Supervisor's Comments

B. Achieving Program Results: Expectations for All Employees

A. Performance Measures and Major Job Responsibilities

Rate each employee either (1) Unacceptable; (2) Acceptable; (3) Commendable; (4) Exemplary; or (NA) Not Applicable. **Accepts Change** 2. Accepts Responsibility and Accountability 3. Constructive Use of Work Time 4. **Customer Relations** Peer Relations/Teamwork 5. 6. Communications 7. Initiative 8. Job-related Decision-making 9. Knowledge of Work 10. Planning/Organization 11. Quality of Work Compliance with Safety Cumulative total for employees with supervisory responsibilities Average Rating

Supervisor's Comments

C. Work Behavior Expectations Employees are expected to comply with all Metros	/Civil Service rules, policies,	and ord	ocedures and all department rules and
regulations, including attendance and observance	of work hours.		
 Compliance with Rules 	□ Acceptable		Unacceptable*
 Attendance 	□ Acceptable		Unacceptable*
 Observance of Work Hours 	☐ Acceptable		Unacceptable*
 A rating of Unacceptable for any of the above ite Documentation of specific problem(s) and com Authorization of next level manager. Authorization of departmental/Metro Human R 	rective and/or disciplinary act Signature_	tions ta	ken.
Year-End Performance Review Employee's Comments			
Supervisor's Comments			
10.			
	Average Rating fr	om A	and B combined 3. 0
Conversation # 1 (see form) occurred on	☐ Develops	nent Pl	ans (see form) were made and tracked.
		11011(1)	and four many word remain and a downer.
This form acknowledges that my supervis	or and I met and discus	sed th	is performance evaluation.
My signature does not imply that I agree	with these evaluation res	sults.	1
Supervisor's/Rater's Signature	time		Date // / 5/2013
Reviewer's Signature	who		Date ////5// 5
Employee's Signature R-P-			Date 1115 2013
	ben CB		1/31/00:0
Director's Signature NCk White	neg co		Date_1/18/90/3
	ormance Rating Definition		
(1) Unacceptable: A Performance Improvement Plan Performance does not meet minimum accepta			
 expected of average performance Employee requires a high level of supervision 		rk result	s
 Improvement is necessary to meet desired len 	val of performance		
Improvement is necessary to meet desired les (2) Acceptable Performance meets acceptable standards, ex	pectations, and requirements		
Improvement is necessary to meet desired lesses. Acceptable Performance meets acceptable standards, experience contributes what is expected of a second contributes what is expected.	pectations, and requirements a qualified, experienced employs		rming in this position
Improvement is necessary to meet desired in (2) Acceptable Performance meets acceptable standards, ex Performance contributes what is expected of a Employee is expected to continue developme (3) Commendable	pectations, and requirements a qualified, experienced employent of new knowledge, skills, or a	bilities	S. Ald (\$200)
Improvement is necessary to meet desired less. Acceptable Performance meets acceptable standards, experience contributes what is expected of a Employee is expected to continue developme. Commendable Consistently meets standards and expectation.	pectations, and requirements a qualified, experienced employ ont of new knowledge, skills, or a ns, regularly exceeds them, and	bilities shows i	nitiative in edditional assignments
Improvement is necessary to meet desired in Acceptable Performance meets acceptable standards, experimence contributes what is expected of a Employee is expected to continue developme Commendable Consistently meets standards and expectation Successfully completes all responsibilities, ever Employee strives to grow professionally through	pectations, and requirements a qualified, experienced employs int of new knowledge, skills, or a ns, regularly exceeds them, and an for projects that require versa	bilities shows i	nitiative in edditional assignments
Improvement is necessary to meet desired lesses (2) Acceptable Performance meets acceptable standards, experiments acceptable standards, experiments acceptable standards, experiments acceptable acc	pectations, and requirements a qualified, experienced employs int of new knowledge, skills, or a ns, regularly exceeds them, and an for projects that require versa gh development activities anding performance is clearly evi-	shows in tile akili dent; pe	nitiative in additional assignments s domance is at a level that is a "stretch"
Improvement is necessary to meet desired lesses (2) Acceptable Performance meets acceptable standards, experiments acceptable standards, experiments acceptable standards, experiments acceptable supported to continue developme (3) Commendable Consistently meets standards and expectation successfully completes all responsibilities, ever the Employee strives to grow professionally through the Exemplary Performance is noticeably exceptional; outstale Performance shows exceptional initiative to pi	pectations, and requirements a qualified, experienced employs int of new knowledge, skills, or a ns, regularly exceeds them, and an for projects that require versa gh development activities inding performance is clearly eviden and anticipate problems, and	shows in tile akili dent; pe	nitiative in additional assignments s formance is at a level that is a "stretch"
Improvement is necessary to meet desired les Acceptable Performance meets acceptable standards, ex Performance contributes what is expected of Employee is expected to continue developme Commendable Commendable Consistently meets standards and expectation Successfully completes all responsibilities, ev Employee strives to grow professionally throught	pectations, and requirements a qualified, experienced employs int of new knowledge, skills, or ans, regularly exceeds them, and an for projects that require versagh development ectivities and anticipate problems, and produce exceptional results.	shows in shows in stile akilli dent; pe demploy	nitiative in additional assignments s formance is at a level that is a "stretch" ree takes appropriate independent action

Benjamin 5 Abwers emp# 621693 effective 9/16/13 43786.08 43786.08

VERIFICATION FOR EDUCATIONAL PAY FORM

45099.66

I. Employee

To comply with the requirements for the Educational Incentive Pay, I am furnishing my department with my college transcript or college degree which indicates the awarding of my degree and the date the degree was confirmed.

CHECK: Associate's Degree 370			
Bachelor's Degree	DATE	9/12/13	
Employée Signature			

II. Department:

The department is requesting Educemployee who has met the requi	cational Incentive Pay for the rements as stated in Police
14.8-I (Fire) (13.8-I (Police). Michael Onell Department's Personnel Staff	DATE 9/24/2013
Appointing Authority/Designee	DATE 1/11

Personnel Department

The college transcript/college degree confirmation has been reviewed and has been verified that the employee has met the requirements to receive the Educational Incentive Pay as stated in the Policy 14.8-I (Fire)/13.8-I (Police).

2ms	trout	DATE	9-24-13
Supervisor of	Data Entry/Payroll		
2.00	74.9.3		
		DATE	
Administrativ	e Division Manager		

Hallatin, Tennessee

The Tennessee Board of Regents for the State University

The Tennessee Board of Regents for the State University and Community College System upon the recommendation of the President, Vice President, and Faculty of the College hereby confers upon

Benjamin S Powers

Who has completed the studies and fulfilled all the requirements set forth by the College for the degree of

Associate of Applied Science

As evidence of attainments and the granting of all rights pertaining to that degree, and
In Testimony Whereof, the seal of the College and signatures as authorized
by the Tennessee Board of Regents are hereunto affixed this
tenth day of August, in the year of our Lord, two thousand and thirteen.

Jan Mary or Bland of Flynnis

Bica Horban

Swann



Phyllis Foley

Jery It outener

ACTULING ELS!

APATE blimpollou (May telahona, Apatesasia Para Ada Peren

Record of: Benjamin S Powers

Date Issued: 23-SER-2013

Date of Birth: 27-JUL-84

Level: Undergraduat

	Level: Undergraduace
E THE SECOND SEC	
Course Level: Undergraduate High-School: East Knox Local School 01-Hay 2002	COURSE TITLE CREE ORD FTS h
141.4 141.4 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Institution Information continued:
Current Program: Corcificate et i your	Total Parnod Crodits 19.00
College : Allied Mealth	TERM CONDINED
Hajor : Fire Science Technology	mira: 18:00 OPA-Hrm: 18:00 OPtm: \$8:00 OPA: 3,22
Degree Awarded Certificate to 1 year 21-Dec-2011	TO BE AND A STATE OF THE STATE
Primary Degree	
College : Allied Health	FAT 102 Hazardous Materials I 3.00 A 12.00
Major , Fire Science Technology	FST 111. Pire Pro Rydraulics Mater aply 3.00 C. 6.00
4.25. 6.46 Child. S. 48.W.D. 2 / A.M. 6.05	PS7 116 Pire Prevencion 3.00 A: 112.00
Degree Awarded Associate of Applied Science 10-AUG-2013 Primary Degree	FST 201 Fire Investigation I 3.00 C 6.00
College Allied Health	Total Barned Credits 12,00
Major (Pire solence Technology	Good Stending
	Thra: 12,00 GPA-Hra: 13.00 QPha: 26.00 GPA: 1.00
SUAJ NO. COURSE TITLE CASD GRO PTS	
A STATE OF THE REAL PROPERTY OF THE PROPERTY OF	
TRANSFER CREDIT ACCEPTED BY THE INSTITUTION:	Spring Ferm 2019
TRANSFER CREDIT ACCEPTED BY THE INSTITUTION:	PST 109 Legal Aspeats of Eser Syon 3.00 A 12.00
10/02-12/04 ACE Military Crodit	PST 209 Hasardona Haberials II 2.00 C 6.00 For 222 Pire towerigation II 3.00 A 12.00
	PST 222 Pire lovestigation II 3.00 A 12.00 PST 231 NSPA Dita Sacety code 2.00 A 12.00
PRD ACT	Total Barned Credits 12.00
Total Sarned Credità 0,00	Good Scanding
医感激性 医阿克雷特特特氏 医树皮膜 计记录器	Ehre 12.00 OPA-hra: 12:00 OPAs. 42:00 OPA: 1.50
Nug 2009 Piro Solence Training	Ehrs: 12.00 GPA-Hrs: 12:00 GPCs. 42:00 GPA: 3.50
PST 101 - Principles of Emergency Svo 1.00 75	***************************************
Total Barned Credita . 2 3,90	Fall Torm 2010
	Just 116 Fire Babaylor and Combustion .: 3:00-C 6.00-
RE-EYETH INSTITUTION SUMMARY HOUSE:	For 130 Leadership Development 3.00 C 6.00
Total Tarned Credits 0.00	FST 201 Bldg Construction Fire Protect 1.00 D 3.00 P
egod valuo hatenter mareya an	7ST 219 Hazardous Materials Chemistry . 3.00 D 3.00
Total Earned Credits 0.60	
ASTITUTION CREDIT:	10 DECEMBER 2015 1 1997 1 1997 1 1997 1 1998 1 1997 1 1998 1 1997 1 1998 1 1997 1 1998 1 1997 1 1998 1 1997 1
pring Texp 2007	
Tr 101 249 Theories (Basic) 12:00 B 16:00 Tr 1010 E S Clinical (Webic) 2:00 A 8:00	Language Committee of the committee of t
T. 104 . 7 Sury Anat Phyd Pre-Hogo Prov. 2,00 A . 0.00	
II, 121 Int Pro-Half Kingry Pharmacoldy 2,00 h 6.00	
CONTINUED ON HEXT CONTINUED ON HEXT COLUMN WASHINGTON	
r tha jaga ya Yaran ya Tabi at	I TO SEE THE TANK A SECULAR
with the state of the same of the	
the file of the state of the st	
The state of the s	Production of the absence II
 MACRIE 2021 (CONTROL NOTE) IN CONTROL OF CONTROL OF	Ye or many it is not the section of the section (a) 1 (a) 1 (a) 1 (b) 1 (a) 1 (b) 1 (a) 1 (b) 1 (a) 1 (b) 1 (b) 1 (b) 1 (c)

This utilities proceed and regard transcript is princed in the CRIP SEASES. In the conductive with USC THE LAW OF The County Concentrated Rights and Polyacy Act of 1974 who are breaky against these this interpretation the face of the document. A coord coal is not required, when phinological are no obtained the mod COPY will appear A to ACK ON WITHE OR A COLOR COPY SHOULD BUT DE ACCESSED.

is pool (ded apon the execution that you your agent or corplayers will per pertilitials, taker party access to take count without consent of the strottent. Alternation, at this transcriptions to a consent offense.

तिवारीयास्य देवोद्धाः स्वयोगस्य स्टब्स्ट

Walter Some of

ંજેલાઈ (ઉપલાસ)માં કરોદાન ઉત્સાસના, ઉત્તિ હોંગાઉન કાહિદાઈ ઉત્તર પ્રકૃષ્ટિ જાજ્યાના સમાના

Record of Benjamin S Powers

Level: Undergraduate

FOR THE PROPERTY OF THE PARTY O	Level, Ondergranace
SUBJ NO. COURSE TITLE CRED GRD PTS R	SUBJ HO. COURSE TITLE CRED GRO PTS R
and the second s	A Property of the second of th
Institution Information continued: Total Earned Credits 12.00	Inscitution Information continued: Total Earned credits 7:00
Good Scanding	Good Standing
TERM POSSITION Phin: 12:00 GPA-Bray 12:00 OPEs: '18:00 GPA: 1:50	TERM COMMINED
strange selden same served ser	Ehra: 7,00 GPA: Nra: 7.00 OPTs: 20.00 GPA: 3.42

Spring ferm 2011.	TOTAL INSTITUTION 75.00 75.00 217.00 2.74
1000 Intro to Film . 3.00 b 1.00	
PST 119 (Readus Awareness 1.00 A 12.00 PSY 101 General Psychology 5.00 C 6.00	TOTAL TRANSFER. 1 6.00 0.00 0.00 0.00
Total Barned Credita - 9:00	Oversity. 85.00 79.00 217.00 2.74
Good standing	[]
khrat i 9100 OPA-Hrat 9.00 OPte; 21.00 OPA; 2.33	PARNOG Pre SPA for Points SPA
***************************************	COMM INED
rall ráth 2011	TRANSFER 6.00 0.00 0.00 0.00
Emplish Composition I 1.00 B 5.00 I	COMB TINED
OT 121 Pice Protection System 3.00 C 6.00	OVERALL 85.00 79.00 217.00 2.74
3001 1010 11020 to 8001010gy 1.00 F 0.00 E	cowa niso
Total Firned Credita 9.00	**************************************
геян сомбиней	
Ehra . 18.00 dPA-Hrs: 9.00 OPTs: 18:00 dPA 2.00	
	ANNOUNCE OF THE PROPERTY OF
Cumer Tere 2013	
irot 1010 Esminitali of Biology 1000 B 12.00 p	
AND STREET CONTINUED ON NEXT COLUMN PROSESSESSES	
	Marker Spran Script A Like
THE VENTOR A DOMESTIC TO THE	Manager and the American
	Production of the section of the sec
	to get and the second
The second secon	provide to the company of the second of the company of the second of the company
	strong operate Capilly Cabasaisan Right
	you gir his by notified that labs larodumina alon that you, your up at the Indoors of will
n, as of the loutifician well the word COPY will reject ABLACK ON not primit any other parts	necess writtle recent without consept of the
	nik frankenja may be a emanen nueme. Gullage iz ghallen
ที่เลยเก็ดเปลี้ยนได้ เลี้ยงเล่นสีเลี้ยงให้เลี้ยนได้เลี้ยงให้เลี้ยงให้เลี้ยงให้เลี้ยงให้เลี้ยงให้เลี้ยงให้เลี้ย	NY CHARACHET AMERIKANI AMERIKANINA KAMPANANIN'I NAMBON'I CAMPANA

K Find Cancel Row Tools			
Supplemental Database Code E	Type Data A	Education - Formal	
Employee Address Book Number 621	693 POWERS, BENJAN	nin's	
JDC Table Education Degrees	Code Size 3		
ecords 1 - 2		1	Customize
Degree Description	User Defined Amount	School Atlanded	Remarke Line 2
AFS Associate Fire Science	08/10/2013	VOLUNTEER STATE COMM	COL FIRE SCIENCE
3 (3)			
200 and a control of the control of	and the same		-4
)			
)			
)			
)			
)			



Plan Start Date 11/16/11

Employee Name	Employee # Title/Department	ENG 03-B D-29
Powers, Benjamin S.	621693 FIRE FIGHTER 2	
Lohn DAVA	Rater's Title Fiscal Year 12	
RODUCTS TO THE CITIZENS AND INVOLVEMENT UPON ARRIVAL.	RESCUE/HAZARD RESPONSE PROGRAM IS TO PROVIDE FIRE SU VISITORS WITHIN OUR COMMUNITY SO THEY CAN HAVE FIRES C	ONFINED TO AREA O
. Performance Measur	each employee understands the department's mission and the program es and Major Job Responsibilities acceptable; (2) Acceptable; (3) Commendable; or (4) Exemplary.	s) he/she works in.
. Firefighting and rescue	operations.	4
. General station and equ		4
3. Training and continuous	s education programs	4
. Relief apparatus driving		4
. First responder medical	activities (EMT's only).	4
	Average Rating	-
Supervisor's Comments	Average Raung	4100
	esults: Expectations for All Employees	
3. Achieving Program Rate each employee either (1) Una	esults: Expectations for All Employees acceptable; (2) Acceptable; (3) Commendable; (4) Exemplary; or	(NA) Not Applicable.
B. Achieving Program R late each employee either (1) Una . Accepts Change	cceptable; (2) Acceptable; (3) Commendable; (4) Exemplary; or	4
3. Achieving Program R late each employee either (1) Una . Accepts Change . Accepts Responsibilit	cceptable; (2) Acceptable; (3) Commendable; (4) Exemplary; or ty and Accountability	4
B. Achieving Program R late each employee either (1) Una . Accepts Change . Accepts Responsibilit . Constructive Use of V	cceptable; (2) Acceptable; (3) Commendable; (4) Exemplary; or ty and Accountability	4 4 3
B. Achieving Program R late each employee either (1) Una . Accepts Change . Accepts Responsibilit . Constructive Use of Volume Relations	ty and Accountability Nork Time	4 3 3
Achieving Program R tate each employee either (1) Una . Accepts Change . Accepts Responsibilit . Constructive Use of V . Customer Relations . Peer Relations/Team	ty and Accountability Nork Time	4 3 3 4
B. Achieving Program R late each employee either (1) Una . Accepts Change . Accepts Responsibility . Constructive Use of V . Customer Relations . Peer Relations/Team . Communications	ty and Accountability Nork Time	4 3 3 4 4
Achieving Program R late each employee either (1) Una . Accepts Change . Accepts Responsibilit . Constructive Use of V . Customer Relations . Peer Relations/Team . Communications . Initiative	ty and Accountability Nork Time	4 3 3 4 4
Achieving Program R tate each employee either (1) Una . Accepts Change . Accepts Responsibility . Constructive Use of V . Customer Relations . Peer Relations/Team . Communications . Initiative . Job-related Decision-	ty and Accountability Nork Time	4 3 3 4 4 4 4 4
Achieving Program Rate each employee either (1) Una Accepts Change Accepts Responsibility Constructive Use of Variations Peer Relations/Team Communications Initiative Job-related Decision- Knowledge of Work	ty and Accountability Nork Time work making	4 3 3 4 4
Achieving Program R late each employee either (1) Una . Accepts Change . Accepts Responsibilit . Constructive Use of V . Customer Relations . Peer Relations/Team . Communications . Initiative . Job-related Decision Knowledge of Work 0. Planning/Organization	ty and Accountability Nork Time work making	4 3 3 4 4 4 4 4 3
Achieving Program Rate each employee either (1) Una Accepts Change Accepts Responsibility Constructive Use of Vaccepts Relations Peer Relations/Team Communications Initiative Job-related Decision-Knowledge of Work Quality of Work	ty and Accountability Nork Time work making	4 3 3 4 4 4 4 4
Achieving Program Rate each employee either (1) Una. Accepts Change Accepts Responsibility Constructive Use of V. Customer Relations Peer Relations/Team Communications Initiative Job-related Decision- Knowledge of Work Newledge of Work Planning/Organization Quality of Work Compliance with Safe	ty and Accountability Nork Time work making	4 3 3 4 4 4 4 4 3
Achieving Program Rate each employee either (1) Una. Accepts Change Accepts Responsibility Constructive Use of V. Customer Relations Peer Relations/Team Communications Initiative Job-related Decision- Knowledge of Work Newledge of Work Planning/Organization Quality of Work Compliance with Safe	ty and Accountability Nork Time work making	4 3 3 4 4 4 4 4 3
Achieving Program Rate each employee either (1) Una. Accepts Change Accepts Responsibility Constructive Use of V. Customer Relations Peer Relations/Team Communications Initiative Job-related Decision- Knowledge of Work Newledge of Work Planning/Organization Quality of Work Compliance with Safe	ty and Accountability Nork Time work making	4 3 3 4 4 4 4 4 4 4 4 4 4

C. Work Behavior Expectations Employees are expected to comply with all Metro	/Civil Service rules, policies,	and procedures and all department rules and
regulations, including attendance and observance	of work hours.	
Compliance with Rules	Acceptable	☐ Unacceptable*
Attendance	☑ Acceptable	☐ Unacceptable*
 Observance of Work Hours 'A rating of Unacceptable for any of the above ite 	Acceptable	☐ Unacceptable*
Documentation of specific problem(s) and com		tions taken.
 Authorization of next level manager. 	Signature_	
☐ Authorization of departmental/Metro Human R	esources office. Signature_	
Year-End Performance Review		
Employee's Comments		
Supervisor's Comments		
SETH IS HARD NORMEN HO & FIRES. HOIS ON AS	envous mak	in both RUNG
& FIRES. HOLE ON A	SET TO BOYL	The Company
		the congress of
THE DEPARTMENT,		
		3 94
	Average Raung n	rom A and B combined 3,88
Company to the form from a company of the	FT countries	
Conversation #1 (see form) occurred on	Develop	ment Plans (see form) were made and tracked.
This form acknowledges that my supervis	or and I met and discus	sed this performance evaluation.
My signature does not imply that I agree v		
Supervisor's/Rater's Signature	mure 1	Date_5/7/50/3
Supervisor strater s orginatory	111	
Reviewer's Signature	ensy of.	Date_C/15/13
Employee's Signature 13-17-	Benjamin Pou	NECT Date 5/7/2013
h & 9.	by CA	
Director's Signature Dully OlyAC	in us	Date 6-17-13
	rmance Rating Definition	
(1) Unacceptable: A Performance Improvement Plan (Performance does not meet minimum accepts)		ividual performance rating of Unacceptable. Indicate the second requirements of the job, or is below what can be
expected of average performance		
 Employee requires a high level of supervision Improvement is necessary to meet desired level 	- Continue and the cont	or results
(2) Acceptable		
 Performance meets acceptable standards, ex Performance contributes what is expected of ; 	Figure 1 and	ee performing in this position
 Employee is expected to continue development 		
(3) Commendable Consistently meets standards and expectation	ne requirely accessed them, and	shows initiative in additional assignments
 Successfully completes all responsibilities, ev 	en for projects that require versu	atile skills
 Employee strives to grow professionally through (4) Exemplary 	gh development activities	
 Performance is noticeably exceptional; outsts 	nding performance is clearly evi	ident; performance is at a level that is a "stretch"
 Performance shows exceptional initiative to pi 	an and anticipate problems, and	d employee takes sopropriate independent action
Dankananan asarahan Mila sa sa sasarahan k		
Performance requires little or no supervision to (NA) Not Applicable This reting can be used when the category discountry.	o produce exceptional results	



METROPOLITAN GOVERNMENT ACCEPTABLE USE OF INFORMATION ASSETS POLICY CONSENT AND RELEASE FORM

I, Serimin Towe (S) as an employee of/applicant for employment with Metropolitan Government, acknowledge that I have read and understand the Metropolitan Government's Acceptable Use of Information Technology Assets Policy. Except as otherwise provided by applicable law, I have no expectation of privacy when using the Metropolitan Government's Information Technology Assets

I acknowledge that Information may be gathered through monitoring, searching and reviewing my or any use of the Metropolitan Government's Information Technology Assets and Information, including, without limitation, files and emails. I understand that, except where it would be prohibited by law, the Metropolitan Government may disclose any Information obtained through such monitoring and I consent to such disclosure. I understand that such information may be used in a disciplinary action against me or in judicial proceedings. I understand that any violations of this Policy on my part could result in disciplinary actions being taken against me, up to and including termination of employment.

Employee/Applicant Signature

4-30-12

Date

621695

Employee Number

Department

Form Version 1.2





Plan Start Date 11/16/10 Plan End Date 11/13/11

Employee Name	T E		-15-C E28
POWERS, BENJAMIN	Employee # 621693	Title/Department FIRE FIGHTER 2 SUP	nnrecion
Rater's Name Leslie Hollis	Reter's Title Captain	Fiscal Year	PRESSION
Program Purpose Statement			
PRODUCTS TO THE CITIZENS AND VIS INVOLVEMENT UPON ARRIVAL.	SCUE/HAZARD RESPONSE PROGRAM IS ITORS WITHIN OUR COMMUNITY SO THE	TO PROVIDE FIRE SUPPRIEY CAN HAVE FIRES CONFI	ESSION AND RESCUE
	ch employee understands the department's n		
	,, ship by the division and the department's n	nission and the program(s) he	/she works in.
A Performance Massume	and Malan tal B		
Rate each employee either (1) Unacce	and Major Job Responsibili eptable; (2) Acceptable; (3) Commenda	ities	
i. Firefighting and rescue op	erations.	ole, or (4) Exemplary,	3
2. General station and equip	ment maintenance.		2
I raining and continuous e	ducation programs.		3
Relief apparatus driving ar	nd scene operations.		
First responder medical ac	tivities (EMT's only).		3
		Average Rating	2.6
Supervisor's Comments	to get his Fi has also gotten		
B. Achieving Program Res	ults: Expectations for All En	mployees	
Rate each employee either (1) Unacce	ptable; (2) Acceptable; (3) Commendab	le; (4) Exemplary; or (NA)	Not Applicable.
1. Accepts Change		<u> </u>	
2. Accepts Responsibility a	and Accountability		
Constructive Use of Wor	rk Time		2
4. Customer Relations			2
5. Peer Relations/Teamwo	rk		3
6. Communications			2
7. Initiative			_2
8. Job-related Decision-ma	King		3
9. Knowledge of Work			2
10 Planning/Organization			_2
11. Quality of Work			2
12. Compliance with Safety			_2
Cumulative total for employee	s with supervisory responsib	oilities	
S		Average Rating	2.1
Powers Shows So	god initiative a	ed works	well -
with fellow employ	yses.		

E	work Benavior Expectations imployees are expected to comply with all Metro/Civil Service rules, policies, and procedures and all department rules and expected to comply with all Metro/Civil Service rules, policies, and procedures and all department rules and expected to the complex rules.
re	Compliance with D. I.
	Compliance with Rules Acceptable
	Observable Li Oriacceptable
/	Observance of Work Hours Acceptable Unacceptable
ö	A rating of Unacceptable for any of the above items requires the following: Documentation of specific problem(s) and corrective and/or disciplinary actions taken. Authorization of next level manager.
	Authorization of next level manager. Signature Authorization of departmental/Metro Human Resources office. Signature
Y	rear-End Performance Review Imployee's Comments
_	
	apervisor's Comments
9	Powers is a good finemen and medic. He is improving his abilities everyday.
Th	Average Rating from A and B combined 2.5 Conversation # 1 (see form) occurred on
Rev	viewer's Signature Sarry Juliusan Date 10-7-11
Em	ployee's Signature K-Pt Binggin Yowers Date 10-1-11
Dire	ector's Signature Date //-30-//
	Performance Rating Definitions
(1)	Performance Improvement Plan (PIP) will be initiated for any individual performance rating of Unacceptable. Performance does not meet minimum acceptable standards, expectations, and requirements of the job, or is below what can expected of average performance Employee requires a high level of supervision or assistance to accomplish work results.
/21	Improvement is necessary to meet desired level of performance Acceptable
(2)	Performance meets acceptable standards, expectations, and requirements
	 Performance contributes what is expected of a qualified, experienced employee performing in this position.
(3)	 Employee is expected to continue development of new knowledge, skills, or abilities Commendable
	 Consistently meets standards and expectations, regularly exceeds them, and shows initiative in additional assignments Successfully completes all responsibilities, even for projects that require versatile skills
(4)	 Employee strives to grow professionally through development activities Exemplary
	Performance is noticeably exceptional; outstanding performance is clearly evident; performance is at a level that is a "stretch" Performance shows exceptional initiative to place and anticipate and performance is at a level that is a "stretch"
	 Performance shows exceptional initiative to plan and anticipate problems, and employee takes appropriate independent action Performance requires little or no supervision to produce exceptional results
(NA)	Not Applicable
	 This rating can be used when the category does not apply to the employee's job duties or it may be too soon to rate the employee's performance in this category



Plan Start Date 11/16/09
Plan End Date 11/16/10

Employee Name	Employee #	E-15-C D28
POWERS, BENJAMIN Rater's Name	021093	FIRE FIGHTER 2 SUPPRESSION
Leslie Hollis	1 . 1/1471./1	iscal Year
Program Purpose Statement	V	
	UE/HAZARD RESPONSE PROGRAM IS TO PE DRS WITHIN OUR COMMUNITY SO THEY CAN	ROVIDE FIRE SUPPRESSION AND RESCUE
oupervisors and amountaged to ensure each e	mployee understands the department's mission	and the program(s) he/she works in.
A Porformance Management		
Rate each employee either (1) Unescart	nd Major Job Responsibilities	
Firefighting and rescue oper	able; (2) Acceptable; (3) Commendable; or	
General station and equipment	autoris,	3
Training and continuous edu	loction programs	2
Relief apparatus driving and	cation programs.	3
5 First responder medical activ	scene operations.	3
First responder medical activities	vities (EMI's only).	3
Supervisor's Comments	Aver	rage Rating 2.6
Soft is a cond	fireficher and is being fine science co	ontinuing is
	14.	
enacation by	there science c	wses
D. Anhiomina D.	. 151 991	
Rate each employee either (1) Unescepte	ts: Expectations for All Employ	vees
Accepts Change	ble; (2) Acceptable; (3) Commendable; (4)	
Accepts Responsibility and	d Associatability	.2
Constructive Use of Work	Time	3
Customer Relations	Time	2
5. Peer Relations/Teamwork		2
6. Communications		3 3 3
7. Initiative		
		3
	ng	
		3
10. Planning/Organization		3
11. Quality of Work		3
12. Compliance with Safety	***	2
Cumulative total for employees	with supervisory responsibilities	3
	Aver	age Rating 2.58
Supervisor's Comments		
1 12 1	near cephine and is	make some at
Sett has sind (peer relating and is ed decisions.	making improcessors
in his lish relat	ed duising.	
1 0 0		
		1

A	mployees are expected to comply with all Metro/Civil Service rules, policies, and procedures and all department rules and egulations, including attendance and observance of work hours. Compliance with Rules Acceptable Acceptable Unacceptable Observance of Work Hours Acceptable Unacceptable* Unacceptable* Training of Unacceptable for any of the above items requires the following: Documentation of specific problem(s) and corrective and/or disciplinary actions taken. Authorization of departmental/Metro Human Resources office. Signature
	ear-End Performance Review
	Sett his sould forstighting skills and continues to make improvements. Sett is also a skilled ZMT and Le is continued his education.
Sı	spervisor's Comments
į	Average Rating from A and B combined 2.59
	Conversation # 1 (see form) occurred on Development Plans (see form) were made and tracked.
Th My	ils form acknowledges that my supervisor and i met and discussed this performance evaluation. signature does not imply that I agree with these evaluation results.
Su	pervisor's/Rater's Signature Statio Helley Date 12-5-10
	viewer's Signature Larry Julius Date 12-17/2010
Em	poloyee's Signature Benjamin Towers Date 18-5-10
Dir	ector's Signature Step 12-23-10
(1)	Unacceptable: A Performance Improvement Plan (PIP) will be initiated for any individual performance rating of Unacceptable. Performance does not meet minimum acceptable standards, expectations, and requirements of the job, or is below what can be expected of average performance Employee requires a high level of supervision or assistance to accomplish work results
(2)	 Improvement is necessary to meet desired level of performance Acceptable
	 Performance meets acceptable standards, expectations, and requirements Performance contributes what is expected of a qualified, experienced employee performing in this position
(3)	 Employee is expected to continue development of new knowledge, skills, or abilities Commendable Consistently meets standards and expectations, regularly exceeds them, and shows initiative in additional assignments Successfully completes all responsibilities, even for projects that require versatile skills
(4)	 Employee strives to grow professionally through development activities Exemplary Performance is noticeably exceptional; outstanding performance is clearly evident; performance is at a level that is a "stretch"
/410	 Performance shows exceptional initiative to plan and anticipate problems, and employee takes appropriate independent action Performance requires little or no supervision to produce exceptional results
(NA)	 Not Applicable This rating can be used when the category does not apply to the employee's job duties or it may be too soon to rate the employee's performance in this category



Plan Start Date_11/16/08 Plan End Date__11/16/09

		Plan En	Date 11/16/09
Employee Name POWERS, BENJAMIN S.	Employee # 621693	Title/Department FIRE FIGHTER 2 St	E-15-C D28
Rater's Name Lastic Hollis	Rater's Title Captain	Fiscal Year	T FRESSION
Program Purpose Statement THE PURPOSE OF THE BASIC FIRE/RESCUI PRODUCTS TO THE CITIZENS AND VISITOR INVOLVEMENT UPON ARRIVAL	E/HAZARD RESPONSE PROGRAM I S WITHIN OUR COMMUNITY SO TH	ET CAN HAVE FIRES CON	FINED TO AREA OF
Supervisors are encouraged to ensure each em	ployee understands the department's	mission and the program(s) i	he/she works in.
A. Performance Measures and Rate each employee either (1) Unacceptab	d Major Job Responsibi	lities	
1. Firelighting and rescue opera	tions.		2
General station and equipmer	nt maintenance.		2
Training and continuous educ	ation programs.		3
Relief apparatus driving and s	cene operations.		
First responder medical activit	ies (EMT's only).		2
		Average Rating	2
Supervisor's Comments			
Powers does a good colls. He is enrolled for his firefighter II maintenance duties. B. Achieving Program Results	: Fynactations for All E	mnlowas	
Rate each employee either (1) Unacceptable	e; (2) Acceptable; (3) Commendal	ble; (4) Exemplary; or (NA	Not Applicable.
1. Accepts Change			2
2. Accepts Responsibility and	Accountability		2
3. Constructive Use of Work T	me		2
4. Customer Relations			2
5. Peer Relations/Teamwork 6. Communications			2
			2
7. Initiative			2
B. Job-related Decision-making			2
Nowledge of Work	- winner		2
Planning/Organization			2
Quality of Work			2 2 2
2. Compliance with Safety			2
Cumulative total for employees w	ith supervisory responsi	bilities	2
Supervisor's Comments		Average Rating	2
Powers shows good in his job better He also directions well. He make good on the job decisi	itistive and show has good peer re es good use of ione.	of desire to playing and his time and	leon takes d makes

	C. Work Behavior Expectations Employees are expected to comply with all Matro	/Chil Sandaa valaa vallata	and the second
	Employees are expected to comply with all Metro regulations, including attendance and observance	of work hours.	and procedures and all department rules and
	 Compliance with Rules 		☐ Unacceptable*
	 Attendance 	☑ Acceptable	☐ Unacceptable*
	 Observance of Work Hours 	Acceptable	☐ Unacceptable*
	*A rating of Unacceptable for any of the above ite	ms requires the following:	
	 Documentation of specific problem(s) and con Authorization of next level manager. 	Signature	ions taken.
	 Authorization of departmental/Metro Human R 	esources office. Signature_	
	Year-End Performance Review		
	Manager American and the control of		
	This year has been a gi	rent learning exp	pierence. I am happ with ng and learning more. with who, not I'm very happy and confident in the cray I'm u
	min work and an looking	forward to doing	on and learnery mark.
	THE MINHUS SAIN ITS NOT	whole Var work but	with who, and I'm very happy
	Supervisor's Comments		and confident in the crow I'm u
	Powers is a good i common to learn more about his the right on the job do	nitted employee	He shins device
	to lear hore about his	you our seems	to want to make
	THE MIGHT ON THE JOB OF	ecisions. He is	working on getting
	released to relief drive.		
		Average Pating for	om A and B combined
	Conversation # 1 (see form) occurred on 10/	24/49 Developm	ent Plans (see form) were made and implied
	This form acknowledges that my supervise	or and I met and discuss	ed this performance evaluation.
	my aignature does not imply that I agree w	un these evaluation res	ults.
1	Supervisor's/Rater's Signature Sulio	(elli)	Date10 / 20/09
•	Reviewer's Signature Both Holl	ie Xarry Jahn	
	2 2-	1	0000 10/2/01
	Employee's Signature		Date 10/20/09
	Director's Signature		Date //- 25-09
	Porfor	manas Patina Pasaltia	
	(1) Unacceptable: A Performance Improvement Plan (P	mance Rating Definition (IP) will be initiated for any indivi-	dual performance rating of Linaccontable
	 Performance does not meet minimum acceptate expected of average performance 	le standards, expectations, and	requirements of the Job, or is below what can be
	 Employee requires a high level of supervision of 	r assistance to accomplish work	results
	 Improvement is necessary to meet desired level Acceptable 	of performance	
	 Performance meets acceptable standards, expenses 	ectations, and requirements	
	 Performance contributes what is expected of a Employee is expected to continue development 	qualified, experienced employee	performing in this position
	(3) Commendable		
	 Consistently meets standards and expectations Successfully completes all responsibilities, ever 	, regularly exceeds them, and sh	nows initiative in additional assignments
	 Employee strives to grow professionally through 	i for projects that require versatil development activities	e skiils
	(4) Exemplary		
	Performance is noticeably exceptional; outstand Performance shows exceptional initiative to plan	and anticipate problems, and a	nt; performance is at a level that is a "stretch" mployee takes appropriate Independent action
	 Performance requires little or no supervision to (NA) Not Applicable 	produce exceptional results	Same and the second sec
	 This rating can be used when the category doe employee's performance in this category 	s not apply to the employee's jol	b duties or it may be too soon to rate the



AND DAVIDSON COUNTY

Human Resources Training Division 1417 Murfreesboro Road Nashville, TN 37219-6300

DIVERSITY AWARENESS ACKNOWLEDGMENT OF RECEIPT AND UNDERSTANDING

I hereby acknowledge that I have completed Diversity Awareness Training and received the Diversity Reference Document of the Metropolitan Government of Nashville and Davidson County as established by Executive Order #9 and practiced by the Metropolitan Government of Nashville. I understand that I must abide by this Executive Order #9 and that I am responsible for the resulting work environment.

I also understand that disregard for Executive Order #9 will subject me to disciplinary action, up to and including termination.

Department:	FIRE	Dept.			
Name (Please print): Beni	amin	Power s	S	
Employee Signatur	e: B-	P-		1000 - 100 -	
Employee ID:	21-693		Date:	6-14-49	
Instructor Signature		ochth K.	Walker		
			Date:	-	



Metropolitan Government of Nashville & Davidson County

Performance Evaluation Form

Plan End Date E-25-A D29 Plan Start Date 05/16/08 11/16/08 **Employee Name** Employee # Title/Department POWERS, BENJAMIN 621693 **FIRE FIGHTER 1 SUPPRESSION** Rater's Name Welter Den Rater's Title pist Ch Fiscal Year Program Purpose Statement
THE PURPOSE OF THE BASIC FIRE/RESCUE/HAZARD RESPONSE PROGRAM IS TO PROVIDE FIRE SUPPRESSION AND RESCUE PRODUCTS TO THE CITIZENS AND VISITORS WITHIN OUR COMMUNITY SO THEY CAN HAVE FIRES CONFINED TO AREA OF INVOLVEMENT UPON ARRIVAL Supervisors are encouraged to ensure each employee understands the department's mission and the program(s) he/she works in. A. Performance Measures and Major Job Responsibilities Rate each employee either (1) Unacceptable; (2) Acceptable; (3) Commendable; or (4) Exemplary. Firefighting and rescue operations. 2. General station and equipment maintenance. 3. Training and continuous education programs. 4. Relief apparatus driving and scene operations. First responder medical activities (EMT's only). Average Rating Supervisor's Comments B. Achieving Program Results: Expectations for All Employees Rate each employee either (1) Unacceptable; (2) Acceptable; (3) Commendable; (4) Exemplary; or (NA) Not Applicable. Accepts Change 2. Accepts Responsibility and Accountability Constructive Use of Work Time 3. 4. Customer Relations 5. Peer Relations/Teamwork 6. Communications 7. Initiative 8. Job-related Decision-making Knowledge of Work 10. Planning/Organization 11. Quality of Work Compliance with Safety Cumulative total for employees with supervisory responsibilities Average Rating Supervisor's Comments

Employees are expected to comply with a	Il Metro/Civil Service rules, policies	and procedures and all department rules and
regulations, including attendance and obs	ervance of work hours.	
Compliance with Rules	Acceptable	☐ Unacceptable*
Attendance	☑ Acceptable	☐ Unacceptable*
 Observance of Work Hou *A rating of Unacceptable for any of the ab 		☐ Unacceptable*
Documentation of specific problem(s) a	nove items requires the following: and corrective and/or disciplinary act	ions taken
Authorization of next level manager.	Signature	
☐ Authorization of departmental/Metro Hu	uman Resources office. Signature_	
Year-End Performance Review	W	
Employee's Comments		
Supervisor's Comments		
Gapervisor a Comments		
	Assesses Bediese for	am A and D sampling 2 3
	Average Rating In	om A and B combined 2.3
Conversation # 1 (see form) occurred o	T Payatana	and Class (see family see a dead of the dead
Colors adductive 1 (add 101111) Occidi160 C	, La Developri	nent Plans (see form) were made and tracked.
This form acknowledges that my su	pervisor and I met and discus-	and this performance evaluation
My signature does not imply that) a	gree with these evaluation res	ults.
Supported Training Standard M. In.	A danne	11/19/20
Supervisor's/Rater's Signature	to remongrain	Date
Reviewer's Signature Reviewer's Signature	1 Dera	Date 1/17/08
Employee's Signature 2 B -	D -8	11/19/08
Employee's Signature	111	Date_////////
Director's Signature	dalfor	Date//-/9-08
	Porformana Poting Potings	
(1) Unacceptable: A Performance Improvement	Performance Rating Definition Int Plan (PIP) will be initiated for any indiv	rrs idual performance rating of Unaccentable
 Performance does not meet minimum 	acceptable standards, expectations, and	d requirements of the job, or is below what can be
expected of average performance Employee requires a high level of sun	ervision or assistance to accomplish wor	v raculta
 Improvement is necessary to meet de 	sired level of performance	r idate
(2) Acceptable	anda ayaantatiaa ayaa ayaa	
 Performance meets acceptable stands Performance contributes what is expe 	ards, expectations, and requirements icted of a qualified, experienced employe	e performing in this position
 Employee is expected to continue dev 	relopment of new knowledge, skills, or at	villues
(3) Commendable Consistently meets standards and exc	pectations, regularly exceeds them, and a	shows initiative in additional assignments
 Successfully completes all responsibil 	lities, even for projects that require versal	tile skills
 Employee strives to grow professional (4) Exemplary 	ly through development activities	
 Performance is noticeably exceptional 	l; outstanding performance is clearly evid	lent; performance is at a level that is a "stretch"
 Performance shows exceptional initiat 	tive to plan and anticipate problems, and	employee takes appropriate independent action
 Performance requires little or no super (NA) Not Applicable 	rvision to produce exceptional results	
	egory does not apply to the employee's j	ob duties or it may be too soon to rate the



TENNESSEE.GOV

Department of Health Susen R. Cooper, MSN, RN, Commissioner



Licensure Verification

Search Results

Page 1 of 1

1- POWERS, BENJAMIN SETH

License Number: 33313

Profession: Emergency Medical

Status: Active
Original Date: 05/23/2007
Expiration Date: 07/31/2010

Personnel

Rank: EMT-IV

1

9/15/08 across

Active Duty Absence Notification Letter

Date: 20080722

Name/Rank: _Benjamin S. Powers/ SSG

and ending 9 October 2008. Your absence from work for this period of military service is You will perform service with the United States Army Reserve beginning on 6 August 2008 United States Code Sections 4301-33. protected by the Uniformed Services Employment and Reemployment Rights Act, Title 38,

During your absence, you can be reached at: BENJAMIN S. POWERS, SSG

applicable). Please be advised that you may not be required to use vacation pay or time for military absence from your workplace, per Title 38, United States Code Section 4316(d), (if UNITED STATES ARMY DRILL SERGEANT SCHOOL, Fort Jackson, SC 29207.

site: www.csgr.org Reemployment Rights Act, contact the National Committee for Employer Support of the If you have any questions about the provisions of the Uniformed Services Employment and Guard and Reserve (ESGR), toll free telephone number 1-800-336-4590 or visit their web

This will cover your Annual Training for TY 2009

WILLIAM H. ERDMAN SFC/1SG Kari F. Dean Mayor

METROPOLITAN GOVERNMENT



AND DAVIDSON COUNTY

Human Resources Training Division 1417 Murfreesboro Road Nashville, TN 37219-6300

SEXUAL HARASSMENT PREVENTION ACKNOWLEDGMENT OF RECEIPT AND UNDERSTANDING

I hereby acknowledge that I have received a copy of Metropolitan Government's Sexual Harassment Prevention Training Guide and that it is the policy of the Metropolitan Government of Nashville and Davidson County not to discriminate against any individual or groups of individuals based on race, color, national origin, gender, religion, age, or disability. I further understand that the sexual harassment prevention policy is included in Metro Guidelines on Discrimination, and that sexual harassment is a form of prohibited discrimination. I have attended a training session at which the sexual harassment prevention policy was discussed, along with education and awareness training on what constitutes sexual harassment. I further understand that there is a complaint procedure that may be accessed by any employee who believes that he/she has been the victim of sexual harassment or any form of prohibited discriminatory action.

I have signed my name below as an indication that I understand the aforementioned policy and I will comply with the contents thereof as I carry out my duties as an employee of the Metropolitan Government of Nashville and Davidson County.

th Powers
Date: 2-29-08

Date: 2-19-08



INTERNET AND ELECTRONIC MAIL USE POLICY ACKNOWLEDGEMENT OF RECEIPT AND UNDERSTANDING

AGREEMENT

I hereby agree that I have read the document entitled "The Metropolitan Government of Nashville and Davidson County Internet and Electronic Mail Use Policy," and certify that I am familiar with the contents of the document and agree to comply with its terms.

I also acknowledge my understanding that any infractions on my part may result in disciplinary action including, but not limited to, removal of e-mail services, removal of Internet services, suspension of access to computers and networks, suspension of employment, termination of employment, recommendation for prosecution.

Benyamin Soth Powers
2 Day Towers
B-P-
FIRE
621693
2-29-68



Employee Acknowledgment

My signature indicates my receipt and review of the following materials:

Metro Employee handbook

Civil Service Rules (department to provide if applicable)

Departmental Rules (department to provide)

Policies and Procedures (department to provide)

Substance Abuse Policy Statement

Ethics Policy and Internet/Email Policy

Discrimination Policy

Title VI Fact Sheet

Employee Assistance Program brochure

Flex-saving Plan Enrollment Form and Privacy Notice

Life insurance information

Initial notice of COBRA rights

Medical insurance information:

BC/BS Preferred Provider and Privacy Notice

Cigna

Dental insurance information:

Delta Dental Preferred (HMO plan)

Delta Dental Premier PPO (Traditional)

Short-term disability and Long-term disability Information

Vision insurance information

Additional information can be located on Metro's website: www.nashville.gov

	·
Witness	
	Witness

& Requests for special accommodations should be directed to 862-6640.

New Employee Orientation – Revised 10/3/07

Kari F. Dean Mayor



AND DAVIDSON COUNTY

Human Resources Training Division 1417 Murfreesboro Road Nashville, TN 37219-6300

SUBSTANCE ABUSE POLICY ACKNOWLEDGMENT OF RECEIPT AND UNDERSTANDING

I hereby acknowledge that I have received the Substance Abuse Policy of the Metropolitan Government of Nashville and Davidson County as established by the Civil Service Commission and adopted as a policy of my department. I have attended a training session at which this policy was discussed, along with education on substance abuse awareness. I understand that I must abide by this policy and that I may be subject to drug and alcohol testing under the circumstances established in this policy.

I also understand that refusal to submit to testing, if ordered, will subject me to disciplinary action.

Department: Fire		
Name (Please print): Ben	ijamin Seth	Powers
Employee Signature: B	-P-	
Employee ID: 621693	3999	Date: February 27, 2008
Instructor Signature: Stephen C	ain	
		Date: February 27, 2008

Please read instructions carefully before completing this form. The instructions must be available during completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work eligible individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because the documents have a future expiration date may also constitute illegal discrimination.

Section 1, Employee Information a	nd Verification.	To be completed a	nd signed by emp	loyee at the tir	ne employment b	egins.
Print Name: Los	O First	150	Middle Initi	The state of the s		
Towers	Benn	min	5			
Address (Street Name and Number)	_,		Apt. #	Date of B	ittli (manth/dawyear)	
City	Stine		Zip Code	Social Se	sunty #	
I am aware that federal law provid imprisonment and/or fines for false use of false documents in connectio completion of this form.	statements or	A citizen o A Inwful pe	ty of perjury, that I am r national of the Unite emanent resident (Ali thorized to work until Admission#)	ed States ien #) A	-	
Employee's Signature	P			Date (mon.	lvdaytyear)	
Preparer and/or Translator Certifi penalty of perjury, that I have assisted in the co	cation. (To be comp impletion of this form	leted and signed if Sectional that to the best of its	ion I is prepared by a ny knowledge the info	rperson other than rmation is true on	the employes.) I atte d correct.	st, under
Preparer's/Translator's Signature		Prin	1 Name			
Address (Street Name and Number, C	City, State, Zip Code)			Date (month)	(day/year)	
examine one document from List B ar expiration date, if any, of the document List A	one from List (List B		ND	List C	ino
Document title:		nuoslice		500	4	unti
ssuing authority:		IT OF TN			1 secun	
Document #:						
Expiration Date (If any):						
Document #;	167			-		11111111111111111111111111111111111111
Expiration Date (if any):	lis.					
CERTIFICATION - I attest, under pen the above-listed document(s) appear to monit/day/year/ Z 16 08 and employment agencies may omit the date	be genuine and to that to the best of t	relate to the employ my knowledge the e	er named, that the	employee begi	in employment on	
Signature of Employer or Authorized Represent		Name		Title		
Michel PSmell	reat Nama and Namb	Vichele PS	e)	Date (mo	110 SOCIO	list_
Nashville Fire Dept 5	DO ZACIANO	ence North.	Nashuille'	1137201	2/1/00	
Section 3. Updating and Reverificat	ion. To be comple	eted and signed by	employer.			
A. New Name (if applicable)			R. Date	of Relife (month)	day(year) (if applicat	det.
						nc)
C. If employee's pravious grant of work authori	zation has expired, pr	ovide the information b		t that establishes o	urtent employment el	
Document Title:		Document #:	elow for the documen	Expiration I	Pate (if any):	igibility.
, , , -	best of my knowledg	Document #:	elow for the documen	Expiration I	Pate (if any):	igibility.

Received: 3/19/07

For Official Use

QUAL:______ DNQ:____ DExperience

□Training □Other:

10:56 PM

Only:

SSN: 273883999 METROPOLITAN GOVERNMENT OF NASHVILLE & DAVIDSON COUNTY EMPLOYMENT APPLICATION METROPOLITAN GOVERNMENT OF NASHVILLE & DAVIDSON COUNTY Human Resources Recruitment Center222 Third Avenue North, Suite 158 Nashville, Tennessee 37201 615-862-6640 http://www.nashville.gov/hr_benefits/jobs/employment_center.htm powers, benjamin s CO7 FIRE RECRUIT

NAME: (Last, First, Middle powers, benjamin s		SOCIAL SECURITY NUMBER:
ADDRESS: (Street, City,	State, Zip Code)	
HOME PHONE:	ALTERNATE PHONE:	EMAIL ADDRESS:
DRIVER'S LICENSE: ØYes □No	DRIVER'S LICENSE NUMBER: State: OH Number: sc322324	LEGAL RIGHT TO WORK IN THE UNITED STATES? ØYes □No

A SAME OF THE RESERVE THE STATE OF STREET	PREFERENCES
PREFERRED SALARY: \$2,000.00 per hour; \$32,000.00 per year	ARE YOU WILLING TO RELOCATE? ØYes □No □Maybe
WHAT TYPE OF JOB ARE YOU LOOKING FOR? Regular	Liney be
TYPES OF WORK YOU WILL ACCEPT: Full Time	
SHIFTS YOU WILL ACCEPT: On Call (as needed)	

1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	EDUCATION	ARE I THE STATE OF
DATES: From: 8/1997 To: 5/2002	SCHOOL NAME: east knox	
LOCATION: (City, State) mt. vernon, Ohio	DID YOU GRADUATE? ☑Yes □No	DEGREE RECEIVED: High School Diploma

DATES: From: 11/2006 To: Present	EMPLOYER: army reserve	POSITION TITLE:
ADDRESS: (Street, City, State, Z owensboro, Kentucky	ip Code)	drill prep
COMPANY URL:	PHONE NUMBER:	SUPERVISOR: 1st sgt prude- 1st sgt
HOURS PER WEEK: 5	\$200.00/month	MAY WE CONTACT THIS EMPLOYER?

DATES: From: 10/2002 To: 11/2006	EMPLOYER:	POSITION TITLE:
ADDRESS: (Street, City, State, Zip ft.cambell, Kentucky 42223	Code)	T com react
COMPANY URL:	PHONE NUMBER: (270) 798-3312	SUPERVISOR: SFC KENNETH HILL- Platoon Sqt
HOURS PER WEEK: 40	\$ALARY: \$4.00/month	MAY WE CONTACT THIS EMPLOYER? ⊠Yes □No
DUTIES:		T ETTES LINO

	The man april are the pristal	Received: 3/19 andards for myself and team. Meet or take care of any p	ersone
REASON FOR LEAVING: my enlistment was up			
The state of the s			
「城」 一	CERTIFICATI	ES AND LICENSES	
TYPE:			
LICENSE NUMBER:		ISSUING AGENCY:	
	· · · · · · · · · · · · · · · · · · ·	KILLS OF THE	16.2
OFFICE SKILLS: Typing: Data Entry:			
OTHER SKILLS:		and the state of t	
LANGUAGE(S):			
Military Service was in the army stationed a		erved two years in iraq I got out at the rank of sgt in no	y of O
	DECL.	ERENCES AND	
Wet - Burg. Prints - Safety	MELL		
REFERENCE TYPE:	NAME:	POSITION:	17-
REFERENCE TYPE: Personal	NAME:	POSITION: metro firefighter	
REFERENCE TYPE: Personal ADDRESS: (Street, City, State	NAME:	metro firefighter	
REFERENCE TYPE: Personal ADDRESS: (Street, City, Stat	NAME:		
REFERENCE TYPE: Personal ADDRESS: (Street, City, Statement of the Company of the	NAME:	metro firefighter	
REFERENCE TYPE: Personal ADDRESS: (Street, City, Statement of the Company of the	NAME:	PHONE NUMBER:	
REFERENCE TYPE: Personal ADDRESS: (Street, City, Statement of the City) EMAIL ADDRESS: REFERENCE TYPE: Personal	NAME:	metro firefighter PHONE NUMBER:	
REFERENCE TYPE: Personal ADDRESS: (Street, City, State EMAIL ADDRESS: Personal ADDRESS: (Street, City, State EMAIL ADDRESS:	NAME:	PHONE NUMBER:	

Agency Wide Supplemental Questions

1. Are you a Matro Government employee?

No

- 2. If you are a Matro Government employee, select the box that best describes your status.
- 3. Driver's License: Do you have a valid driver's license?

Yes

4. Have you ever had your driver's license suspended or revoked? NOTE: Fallure to have a driver's license will not always be considered grounds for disqualification, but will be weighed relative to the position sought.

No

- 5. List any profession you are licensed or certified to practice, giving the type of license, number, expiration date and state the license was issued:
- Are you claiming Veteran's Preference for military service? If yes, the Long Form DD214 with "HONORABLE" discharge must be provided.

Yes

- 7. Have you ever been convicted for violation of the law other than minor traffic offenses? If yes, state the nature of the offense(s), city, state, and disposition. NOTE: A conviction record will not always be considered grounds for disqualification, but will be weighed relative to the position being sought.
- 8. If you answered "yes" to the previous question, use this area to explain.

9.

powers, benjamin s

SSN: 273883999

Received: 3/19/07 10:56 PM

Have you ever been discharged or forced to resign from employment? NOTE: Do not include business closures or general layoffs.

Nσ

- 10. If you answered "yes" to the previous question, use this area to explain.
- 11. May we contact your present employer?

Yes



powers, benjamin s

SSN: 273883999 Job Specific Supplemental Questions

Received: 3/19/07 10:56 PM

1. 1. Are you a U. S. citizen?

Yes

 Are you now or will you be at least 21 years of age by June 13, 2007? *Note: A U.S. Birth Certificate or Naturalization Certificate will be required of candidates selected.

Yes

3. Do you have a felony conviction?

No

4. Do you have a valid "operator" or higher Driver's License?

Yes

5. Are you a licensed EMT or Paramedic?

No

6. Do you live within a 250 mile radius of Nashville, Tennessee?

Yes

7. Do you have a High School diploma or a state issued G.E.D.?

Yes