CAREER NOTES

		Mariana	Botelho-Lipham
PAGE#	DATE	ACTION	REASON
BIQ			
2,	2-4-19	Employed	Records Admin spec
C19			·
	4-18-19	Comm Ltr	Fast service
			1
	10-12-20	promoted	50 Admin Spec, SR-open rec
	8-1-22	Promoted	Admin coordinator
	_		
	_		
<u></u>			
			•



Attached is a copy of your job description. Please sign this form to acknowledge receipt of your job description.

	COORDINATOR, ADMINISTRATIVE	
	Title of Job Description	
Print Name:	MARIANA BOTELHO-LIPHAM	
Cignotura	120001 01 0 00	
Signature:	Bolelholipham	
Date:	08/09/2022	

Personnel Status Change Form

Badge Nu	mber:		Action Cod	de:		Rea	son Code:	
		600 - Salary	Change		600 - P	romotion	1	
me		First N	lame		Middle	Socia	I Security	Number
	MARIA	ANA						
Street				City		Sta	ite Z	ip Code
Personnel	E-mail:	Bene	efit Group:	Birth Date:	Marital	Status:	Gender:	Veteran:
		FULL	TIME	/83	М		F	
	me Street	Street	Badge Number: 600 - Salary 0 MARIANA Street Personnel E-mail: Bene	me First Name MARIANA Street	Badge Number: Action Code: 600 - Salary Change First Name MARIANA Street City Personnel E-mail: Benefit Group: Birth Date:	Badge Number: Action Code: 600 - Salary Change 600 - Page Middle MARIANA Street City Personnel E-mail: Benefit Group: Birth Date: Marital	Badge Number: Action Code: Rea 600 - Salary Change 600 - Promotion me First Name Middle Socia MARIANA Street City Sta Personnel E-mail: Benefit Group: Birth Date: Marital Status:	Badge Number: Action Code: Reason Code: 600 - Salary Change 600 - Promotion me First Name Middle Social Security MARIANA Street City State 2 Personnel E-mail: Benefit Group: Birth Date: Marital Status: Gender:

Current Position Information:

Pstn #:	Ref #:	Position Title:	Salary Grade:	Pstn Type:	FLSA:
2058	1250-005	SO ADMIN SPECIALIST SR	108	CIVIL SERVICE	NON-EXEMPT
Location:	Org:	Personnel Status:		Grant Pstn:	Group/BU:
2210	10022310	FT - FULL TIME WITH LEAVE		No	N100
Object:	Project:	Check Location:	Annual Salary:	Hourly Rate:	
511110		050 - SHERIFF'S OFFICE-GENERAL	\$41,402.38	\$19.9050	

New Position Information:

Pstn #:	Ref #:	Position Title:	Salary Grade:	Pstn Type:	FLSA:
2777	1200-016	COORDINATOR, ADMINISTRATIVE	110	CIVIL SERVICE	NON-EXEMPT
Location:	Org:	Personnel Status:		Grant Pstn:	Group/BU:
2210	10022310	FT - FULL TIME WITH LEAVE		No	N100
Object:	Project:	Check Location:	Annual Salary:	Hourly Rate:	
511110		050 - SHERIFF'S OFFICE-GENERAL	\$44,432.38	\$21.3617	

Supervisor Name:	Supervisor ID:	Payroll Use:	Probation Period:	Probation Type:
JOSEPH PERKINS		□ЕМ □РС	8/1/2022 - 2/1/2023	Position Probation

Scheduled Hours Per Period:	Pay Frequency:	Kronos Pay Code	Auto Paid:
80	Bi-Weekly	40LUNCHCOMP	No
Hired Date:	Original Hire Date:	EEO Function Code	
02/04/2019	02/04/2019	04	
Service Date:	Date in Job:	Supplemental Pay Type:	
02/04/2019	08/01/2022		

Comments:

Action Effective Date: 8/1/2022

Personnel Services Signature

08/01/2022

Date

Job/Salary Effective Date: 8/1/2022

Employee Signature

Date



MARIANA BOTELHO-LIPHAM

Employee ID#

Department: SHERIFF - ADMINISTRATION

2210

RE: 2022 COLA Increase

Current 2021 Annual Salary:	\$39,809.98
Total 2022 COLA Amount:	\$1,592.40
New 2022 Annual Salary:	\$41,402.38

As part of the 2022 Budget, the Board of Commissioners have approved a 4% COLA increase for full time & part time employees employed thru December 31, 2021. Any reclassifications, promotions or demotions will be indicated under separate written notification.

The 2022 COLA salary adjustments and any approved and graded reclassification will be applied effective the pay period commencing on January 3, 2022 and will be reflected in the paycheck of January 21, 2022.

Per county policy, the COLA increase will not be applied to a salary that is at or above the maximum of the assigned 2022 salary grade. Note the 2022 salary grade ranges will be increased 2% above the 2021 salary grade ranges. Those employees whose salary is at or above the 2022 maximum salary of their assigned pay grade will be paid a lump sum payment as a separate check on December 23, 2022. A partial lump sum payment may be applied if the COLA increase brings the employee's salary to the maximum of the assigned 2022 pay grade. Please refer to the Forsyth County Employee Handbook, policy 4 section 5.C.1 for questions regarding the pay out of a COLA lump sum.

The 2022 employee benefit deductions will be applied effective the pay period commencing December 20, 2021 and will be reflected in the paycheck of January 7, 2022.

Sincerely,

Personnel Services Department



MARIANA BOTELHO-LIPHAM

Employee ID #

Department: SHERIFF - ADMINISTRATION

2210

RE: 2021 COLA Increase

Current 2020 Annual Salary:	\$39,029.39
Total 2021 COLA Amount:	\$780.59
Amount of COLA Paid in a Lump Sum:	\$0.00
New 2021 Annual Salary:	\$39,809.98

As part of the 2021 Budget, the Board of Commissioners have approved a 2% COLA increase for full time & part time employees employed thru December 31, 2020. Any reclassifications, promotions or demotions will be indicated under separate written notification.

The 2021 COLA salary adjustments and any approved and graded reclassification will be applied effective the pay period commencing on January 4, 2021 and will be reflected in the paycheck of January 22, 2021.

Per county policy, the COLA increase will not be applied to a salary that is at or above the maximum of the assigned 2021 salary grade. Note the 2021 salary grade ranges will be increased 1% above the 2020 salary grade ranges. Those employees whose salary is at or above the 2021 maximum salary of their assigned pay grade will be paid a lump sum payment as a separate check on December 24, 2021. A partial lump sum payment may be applied if the COLA increase brings the employee's salary to the maximum of the assigned 2021 pay grade. Please refer to the Forsyth County Employee Handbook, policy 4 section 5.C.1 for questions regarding the pay out of a COLA lump sum.

The 2021 employee benefit deductions will be applied effective the pay period commencing December 21, 2020 and will be reflected in the paycheck of January 8, 2021.

Sincerely,

Personnel Services Department



Attached is a copy of your job description. Please sign this form to acknowledge receipt of your job description.

	SPECIALIST SENIOR, SO ADMINISTRATIVE	
	Title of Job Description	
Print Name:	MARIANA BOTELHO-LIPHAM	
Signature:	Bolellohipham	
Date:	10/15/2020	

EE Num	ber:	Badge Nun	nber: Action Code:					Reason Code:					
			600	- Salar	ry Change		600 - Promotion						
	Last Name			First	t Name		ı	Mid	dle	Socia	l Secu	ırity l	Number
BOTELHO-LIPH	HAM		MARIANA										
		Street					City			Sta	te	Z	ip Code
Phone Numb	er:	Personnel E	-mail:	Ве	enefit Grou	p:	Birth Date:		Marital St	atus:	Gen	der:	Veteran
				FU	ILL TIME		′83	М			F		
Current Posit	ion Informa	tion:											
Pstn #:	Ref #:	Position	osition Title:			Salary Grade: Pstn 7		Pstn Ty	Type:		FLSA:		
1388	1215-009	SPECIALIST,	RECORDS ADM	INISTRA	ATIVE		107		CIVIL SE	RVICE		NON	-EXEMPT
Location:	Org:	Personne	el Status:					Grant F		stn:		Grou	p/BU:
2270	10022390	FT - FULL	TIME WITH L	EAVE				No				N100	
Object:	Project:	Check Lo	cation:				Annual Salar	y:	Hourly I	Rate:			
511110		050 - SHE	RIFF'S OFFIC	E-GEN	IERAL		\$37,558.39 \$18.0569			9			
New Position	Informatio	<u>n:</u>											
Pstn #:	Ref #:	Position T	itle:			1	Salary Grade:		Pstn Typ	oe:		FLSA	:
2058	1250-005	SPECIALIST	SENIOR, SO	ADMI	INISTRATIVI	<u> </u>	108		CIVIL SEI	RVICE		NON	-EXEMPT
Location:	Org:	Personnel	Status:						Grant Ps	stn:		Grou	ıp/BU:
2210	10022310	FT - FULL T	IME WITH LE	AVE					No			N100)
Object:	Project:	Check Loc	ation:			1	Annual Salary	/ :	Hourly I	Rate:			
511110		050 - SHER	RIFF'S OFFICE	-GENE	RAL	9	\$39,029.39		\$18.764				
Supervisor Na	me:	Supervi	sor ID: P	ayroll	Use: Pr	oba	ation Period:			Proba	tion 1	Гуре:	

Supervisor Name:	Supervisor ID:	Payroll Use:	Probation Period:	Probation Type:
GRADY SANFORD	604318	□ EM □ PC	10/12/2020 - 4/12/2021	Position Probation

Scheduled Hours Per Period:	Pay Frequency:	Kronos Pay Code	Auto Paid:
80	Bi-Weekly	40LUNCHCOMP	No
Hired Date:	Original Hire Date:	EEO Function Code	
02/04/2019	02/04/2019	04	
Service Date:	Date in Job:	Supplemental Pay Type:	
02/04/2019	10/12/2020		

Comments:

Action Effective Date: 10/12/2020

Personnel Services Signature

10/12/2020

Date

Job/Salary Effective Date: 10/12/2020

Employee Signature

Date



PERSONNEL ORDER 20-38 OCTOBER 16, 2020

EMPLOYED

- Zion Emmanuel Chambers (Employee Badge #3189) is employed as a Deputy Sheriff I and will be assigned to the Jail Training Program, Security Division, Jail Bureau effective October 19, 2020.
- 2. Joshua Samuel Dyer (Employee Badge #3187) is employed as a Deputy Sheriff I and will be assigned to the Jail Training Program, Security Division, Jail Bureau effective October 19, 2020.
- 3. Odane Lomar Lamont (Employee Badge #3190) is employed as a Deputy Sheriff I and will be assigned to the Jail Training Program, Security Division, Jail Bureau effective October 19, 2020.
- 4. James Swatt, III (Employee Badge #3186) is employed as a Deputy Sheriff I and will be assigned to the Jail Training Program, Security Division, Jail Bureau effective October 19, 2020.

PROMOTED

- Records Administrative Specialist Emily Girvan (Employee is promoted to the position of Administrative Coordinator effective October 12, 2020.
- Records Administrative Specialist Mariana Botelho-Lipham (Employee is promoted to the position of SO Administrative Specialist, Sr. She is transferred from the GCIC/Records Unit, Headquarters Division, Sheriff's Services Bureau to Open Records, Office of Professional Standards, Administration effective October 12, 2020.

FIELD TRAINING PROGRAM

- Deputy Sheriff II Johnny Burnette (Employee Badge #3184) is transferred from B Watch, North Patrol Division to B Watch, South Patrol Division, Law Enforcement Bureau for the Shadow Phase effective October 22, 2020.
- Deputy Sheriff II Delano Rodrigues (Employee Badge #3178) is transferred from C Watch to the Crime Reduction Unit, South Patrol Division, Law Enforcement Bureau for the Shadow Phase effective October 21, 2020.

Deputy Sheriff II Charles Tierney (Employee Badge #3182) is transferred from B Watch to the Crime Reduction Unit, South Patrol Division, Law Enforcement Bureau for the Shadow Phase effective October 22, 2020.

Sheriff Ron H. Freeman

Personnel Status Change Form- New Hire/Rehire

EE Number:	Bad	ige Number:	Actio	n Code:		Reason Code:			1
			100-New Hire		е	100-Vacancy			
Last Name		First Name	е		Middle		Socia	I Security	Number:
Botelho-Lipham	Ma	ariana							
Street Address City						Sta	te Zi	p Code	
Phone Number:	Personal E	E-mail Address:		Birthd	late:	Gender	Vet	eran: Y	es No
Marital Status:						s: _			
Nama		Phone	Palatio		/1983	Female	ַ <u></u>	Single	Married
Emergency Contact:					_		L	Divorced	Widowed
Position Information:									
Position #: Reference #:	Position T	itle:			Salary Grade:		ition e:	FLSA:	
1388 1215-009	Record	ls Administ	rative S	pec.	106	, ,,,	Service	Non-E	xempt
Location/CC: Org:	Object:	Project: C	Check Locat	on:	Annu	al Salar	y:	Hourly I	Rate:
	511110		50-Sheriff's Off			\$ 33,042.00 \$15.8856			
Group/BU: Personne	l Status:				Gran	t Positio	n:	Benefit	Group:
N100-NonExempt FT- FT v	with Leave	9			No		FT-Full Time Benefits		me Benefits
Supervisor Name:	Su	pervisor EE #:	15	ation Per	iod:		Prob	ation Type	e:
Leslie Braemer			From: 2/4/19 Initial Probationary Pe			ary Period			
			To:	2/4/20					
Scheduled Hrs per Period: F	Pay Frequent	cy:	Kronos Proj	ect Code:					
80 E	Bi-Weekly		40 Lun	ch	√ (Comp	ı	10	
Hired Date: 2/4/19		Original Hire Dat	e:			EFO F	unction	ı Code:	
Service Date:		Date in Job:						. 20401	
Comments:									
Effective Date of Action: 2/4/19 Job Salary Effective Date:									
						-			
KCh ookas				0					

Personnel Services Signature

Date

Employee Signature

02/04/19

Date



Jan. 17, 2019

Ms. Botelho-Lipham:

It is with great pleasure that the Forsyth County Sheriff's Office offers you the position of Records Administrative Specialist, at an hourly rate of \$15.8866.

In addition, your compensation package includes the following options (these details are for information purposes and are subject to any policy or plan changes):

Eligibility for health, dental and vision coverage, 401(k) plan and flexible spending accounts, subject to plan terms.

Eligibility for company-paid benefits such as life insurance, AD&D insurance, and short/ long term disability.

Paid time off (PTO) earned on an accrual basis and company-paid holidays.

A member of our Background/Hiring Unit will be contacting you shortly to schedule your hire date, completion of your pre-employment paperwork, and uniform pick-up.

We look forward to having you as part of our team and believe you will find this opportunity both challenging and rewarding.

Sincerely,

Ron H. Freeman

Sheriff



PERSONNEL ORDER 19-05 FEBRUARY 1, 2019

EMPLOYED

- Christopher Thomas Robertson (Employee Badge #3104) is employed as a Part-Time Deputy Sheriff II and is assigned to the Traffic Response Vehicle Unit, Traffic Enforcement Section, Special Enforcement Division, Law Enforcement Bureau effective February 4, 2019.
- Christopher David McHugh (Badge #3108) is employed as a Reserve Deputy Sheriff II and is assigned to the Reserves Unit, Special Enforcement Division, Law Enforcement Bureau effective February 4, 2019.
- Guiy Gerald Gimpel (Employee Badge #3109) is employed as a Deputy Sheriff I and is assigned to the Jail Training Program, Security Division, Jail Bureau effective February 4, 2019.
- 4. Patrick Brian Norden (Employee Badge #3106) is employed as a Deputy Sheriff I and is assigned to the Jail Training Program, Security Division, Jail Bureau effective February 4, 2019.
- Nicholas William Smith (Employee Badge #3107) is employed as a Deputy Sheriff I and is assigned to the Jail Training Program, Security Division, Jail Bureau effective February 4, 2019.
- Thomas Leigh Withers (Employee Badge #3105) is employed as a Deputy Sheriff I and is assigned to the Jail Training Program, Security Division, Jail Bureau effective February 4, 2019.
- Mariana Botelho-Lipham (Employee is employed as a Records Administrative Specialist and is assigned to the GCIC/Records Unit, Office of Professional Standards Division, Sheriff's Services Bureau effective February 4, 2019.

TRANSFERRED

 Deputy First Class Scott Goldsberry (Employee Badge #2573) is transferred from C Watch to D Watch, North Patrol Division, Law Enforcement Bureau effective February 6, 2019. Deputy Sheriff II Daniel Byars (Employee Badge #2819) is transferred from the Main Court to the Ordinance/Permits Unit, Judicial Operations Division, Sheriff's Services Bureau effective February 4, 2019.

Sheriff Ron H. Freeman

Page, Angie

From:

Phil Creighton

Sent:

Thursday, April 18, 2019 12:44 PM

To:

SheriffRonFreeman@Forsythco.com

Subject:

Compliments

Dear Sheriff

I know you probably get a lot of hate mail so I felt it fair to compliment your officer that attended an accident that I caused, ran a red light avoiding an idiot that pulled into my path and collided with a lady and pretty much totalled her SUV. First at fault accident in 39 yrs driving a semi.

6am and we had EMS and 3-4 of your deputies there in mins for traffic control etc.

Very professionally handled without some of the attitude i have seen in the past. I would give a shout out to Deputy Caldwell who wrote up my ticket, very professional and pleasant in the circumstances.

Mariana Botelho-Lipham

Secondly the young Brazilian Lady at the Reports Office was super helpful in getting the report out quicker than I have seen. Returned my call and had an e mail copy in minutes

If you are ever in this industrial park and want to see fast cars including Ferraris please stop by. If closed we are probably off racing.

Phil Creighton

Philip Creighton Motorsport Ltd 3109 trotters Pkwy Alpharetta GA 30004



Forsyth County Employment Services

Brandi Zuckerman, Employee Relations Manager

January 11, 2023

JOSEPH PERKINS

SHERIFF - ADMINISTRATION Doug Rainwater

RE: Probationary Status Review for: Mariana Botelho-Lipham

Position Date of Hire: 8/1/2022

Probationary Period Ending: 2/1/2023

Type: POSITION PROBATION - (, Promo to Adnu. Coord.

Dear: JOSEPH PERKINS

Forsyth County Policy requires that all probationary status employees receive a written performance evaluation prior to the end of their probationary period. In an effort to assure that the probationary review has been completed in a timely manner, please complete the attached probationary evaluation form. Be sure to indicate in the final section as to whether the probationary status is completed, if the probationary period is to be extended, or if termination is recommended. The supervisor is to meet with the employee to discuss and review all probationary evaluations performed. This evaluation should be used as a tool to bring attention to any performance areas of concern and to point out areas where the employee is performing above standard.

Once completed and signed off, please send original to my attention in Personnel Services.

Failure to complete and conduct a Probationary review by the end of the probationary period (if under initial hire probation-first year of employment) will result in the employee automatically satisfying their probationary period and becoming Civil Service eligible. Employees, having completed their initial one (1) year probation, but are serving under a position probation are already covered by Civil Service.

Thanks for your attention to this important matter.

If you have any questions, you may contact Brandi Zuckerman at ext. 2806.

Sincerely,

Brandi Zuckerman

Brandi Tickerman

Employee Relations Manager

Attachment

FORSYTH COUNTY GOVERNMENT PROBATIONARY EMPLOYEE EVALUATION

Position Start Date:	08/01/2023	Date of Eval:	02/06/2023				
Employee's Name:	Mariana Botelho-Lipham	Position:	Administrative Coordinator				
Supervisor's Name/Title:	Captain Doug Rainwater	Type: 🔲 Initi	al New Hire Mid-Year Evaluation (6 months)				
Department:	Sheriff - Administration	☐Initi	al New Hire Probation Evaluation (12 months)				
1. Job Duties & F	Responsibilities:	✓ Posi	tion Probation Evaluation (6 months)				
✓ Exceeds Expectations Meets Expectations Below Expectations Substantially Below Exp. Mariana has exceeded expections so far. She has recieved hours of online training so she can keep up the ever changing worlds of open records.							
2. Job Performance:							
✓ Exceeds Expectations Meets Expectations Below Expectations Substantially Below Exp. There are very few times Mariana doesn't have the answer to a question. She works very hard in making sure the open records unit is the standout unit that it is.							
3. Knowledge &	Professionalism:						
	ns Meets Expectations sep and she is always striving fo		tions Substantially Below Exp.				
The only time she is out a hard and busy week.	ns Meets Expectations	s worked on Sa	tions Substantially Below Exp. turdays to get caught up after				
\\ \\\							
Mariana is a valued mer		al Standards. M	tions Substantially Below Exp. ly goal in 2023 is to have a part time es too much for two of them.				
6. Permanent Sta	atus (check only if this perta	ins to probati	onary status):				
N/A (New H	lire mid-year evaluation)	✓	Recommend end of probation				
Do not recommend end of probation							
Supervisor Signature Department Head	xtend probation by month	Date	Termination - 6 - 2023				
Employee Signature	pram	Date	2106/2023				

Original: Employment Services

Copy: Supervisory File

Copy: Employee

Forsyth County Sheriff's Office Performance Evaluation

Non-Supervisor Evaluation Form

Employee's Name: Mariana Boto	elho-Lipham	Rank: C	open Rec.	Unit:	OPS	_ Division:	Headquarters
Evaluator's Name: Douglas Raine	water	Evaluat	ion Period	: From:	10/01/2021	To:	09/30/2022
Evaluator's Rank: Sergeant	_ Reason for Appra	isal: An	nual:X	Probationary	Cther	=	
Appraisal Criteria - Rating Definitions	<u> </u>	·			·•···	<u> </u>	
(5) Superior- Consistently exceeds start (4) Excellent- Often exceeds the standards (3) Good- Consistently meets standards (2) Needs Improvement- Performance (1) Unsatisfactory- Does not meet acce	ard requirements of the j with acceptable perform standards only partially	ob, nance. met.					
Jo	b Factors - Check the ap Comments required fo						
Stress Management (5pts)	1 2 3 4	× 5 🗌	Interperso	nal Skills (8pts)	1]	<u> </u>	4× 5
Tools & Equipment (5pts)	1 2 3 4	× 5	Verbal Co	mmunications S	Skills (8pts) 1	<u> </u>	4 🗙 5
Attendance (5pts)	1 2 3 4	5 ×	Report Wr	iting Skills (8pts)) 1	2 3	4 × 5
Grooming and Appearance (5pts)	1 2 3 4	5 ×	Officer Saf	fety (8pts)	1	<u> </u>	4 🗙 5
Dependability / Productivity (8pts)	1 2 3 4	₹ 5	Job Specif	fic Duties (8pts)	1	2 3	4 🗙 5
Decision Making Skills / Ability (8pts)	1 2 3 4	₹ 5	Conduct a	nd Demeanor (8	8pts) 1	2 3	4 🗙 5
Problem Solving Abilities (8pts)	1 2 3 4	× 5	Profession	nai Developmen	t (8pts) 1	2 3	4 × 5
Employee's Overall Appraisal: Rating	percentage is calculate	ed based o	n 100 possi	ble total points.			
	Total Points:	82.0	Sc	ore: <u>82%</u>	, <u> </u>	erage Rating	: <u>4.10</u>
Employee Strengths							
Mariana is an exceptional employ records laws. Her commitment is agency and our citizens.	ee and she takes he unwavering in the a	r job ver ssurance	y seriously e that the p	/. She has a goolicies and p	great unders procedures a	standing of t are followed	the open to protect the
Areas Needing Development / Impr	ovement						
Mariana is seeking additional classes take to further her knowledge of the open records laws.							
Action(s) to be taken							
Mariana has already doubled the on-line classes she has taken compared to last year.							
Overall Comments							
Mariana is a valued employee of the Forsyth County Sheriff's Office and is capable of different tasks. She has a great ability to put people at ease while discussing the complex world of open records. Our agency is far better because of her dedication in making sure we do it right the first time. Mariana is always at work unless it's a schedule off day or vacation. Mariana wears appropriate attire and represents the Sheriff's Office well.							

^{***}PLEASE ATTACH ANY ADDITIONAL COMMENTS***

Additional Comments	
<u> </u>	
	- -
	• •
	·
	·
	-
	-
	_
	
	· · · · · · · · · · · · · · · · · · ·
	 · ·
	-
· · · · · · · · · · · · · · · · · · ·	

· · · · · · · · · · · · · · · · · · ·	
The state of the s	•

.)

Evaluator's Signature: Our auniwater	Date: October 10, 2022
Division Commander's Signature:	Date:
Comments:	
Bureau Commander's Signature:	Date:
Comments:	
	2
Chief Deputy's Signature:	Date: 10(12023
Comments: MARIANA IS AN ASSET TO THE SKEIN THE GREAT WORK.	Date: 10(12028
Employee Certification: I hereby certify that my rating officer has discussed this appraisal wisubmit a written statement within five (5) days of review.	ith me and that I have been given an opportunity to
Employee's Signature: Selbshipham Title: Ad	nin Goordinate: 10/14/2022
Employee Comments, Goals, and Objectives:	m rucords
understanding of the Open Records Ac	et and its applications
)(1)
Indicates additional documentation is attached.	

Forsyth County Sheriff's Office Performance Evaluation

Non-Supervisor Evaluation Form

Employee's Name: Mariana Bote	iho-Lipham	Rank: _C	Open Rec	Unit:	OPS	Division:	Headquarters
Evaluator's Name: Doug Rainwat	er	Evaluati	on Period:	From: _	10/01/2020) To:	09/30/2021
Evaluator's Rank: Sergeant	Reason for Appra	isal: An	nual: 🔀	Probation	ary: Oth	er:	
Appraisal Criteria - Rating Definitions						. •	
(5) Superior- Consistently exceeds standards of job with outstanding performance. (4) Excellent- Often exceeds the standard requirements of the job. (3) Good- Consistently meets standards with acceptable performance. (2) Needs Improvement- Performance standards only partially met. (1) Unsatisfactory- Does not meet acceptable level of performance expectations.							
Joi	Factors - Check the ap Comments required fo						
Stress Management (5pts)	1 2 3 4	▼ 5	Interpersor	nal Skills (8	pts)	1 2 3	4 🔀 5 🗍
Tools & Equipment (5pts)	1 2 3 4 2	₹ 5	Verbal Con	nmunicatio	ns Skills (8pts)	1 2 3	4 🗙 5
Attendance (5pts)	1 2 3 4	5 ×	Report Wri	ting Skills ((8pts)	1 2 3	4 🗙 5
Grooming and Appearance (5pts)	1 2 3 4	5 ×	Officer Safe	ety (8pts)		1 2 3	4 🗵 5 🗌
Dependability / Productivity (8pts)	1 2 3 4	₹ 5	Job Specifi	ic Duties (8	pts)	1 2 3	4 🔀 5 🗌
Decision Making Skills / Ability (8pts)	1 2 3 4 2	₹ 5	Conduct ar	nd Demean	OF (8pts)		4×5
Problem Solving Abilities (8pts)	1 2 3 4	X 5	Profession	al Develop	ment (8pts)	1 2 3	4 5 🗙
Employee's Overall Appraisal: Rating	percentage is calculate	d based o	n 100 possil	ble total po	ints.		
	Total Points:	83.6	Sc	ore: <u>8</u>	4%	verage Rating	g: <u>4.18</u>
Employee Strengths							
Mariana is an exceptional employ new tasks. Mariana has a deep co agency and also to provide our cit	ommitment in making	g sure th	at the police	cies and p			
Areas Needing Development / Impr	ovement						
Mariana is seeking additional classes for improvement even though she has a strong understanding of the open records laws.							
Action(s) to be taken							
Mariana has been looking for additional training in the area and has been very good at locating online and in-person classes related to open records.							
Overall Comments				·			
Mariana is a valued employee wit wonderful ability at putting people records laws.							

PLEASE ATTACH ANY ADDITIONAL COMMENTS

, č

Evaluator's Signature:	Date:October 15, 2021
·	
Division Commander's Signature:	Date:
Comments:	
Bureau Commander's Signature:	Date:
Comments:	
Chief Deputy's Signature:	Date:
Comments:	Suit.
Employee Certification: I hereby certify that my rating officer has discussed this a submit a written statement within five (5) days of review.	ppraisal with me and that I have been given an opportunity to
Employee's Signature: Bodelbeligham Title	e: Admin ASS. Date: 10/21/2021
Employee Comments, Goals, and Objectives:	
- Indicates additional documentation is attached.	
mandates additional documentation is attached.	

Page 3 of 3 FCSO PE1801-R



CHERYL ROBINSON, Assistant Director

March 1, 2021

Sheriff - Administration
Joe Perkins/ Allison Densmore

RE: Probationary Status Review for: Mariana Botelho-Lipham 2/4/19

Probationary Period: 10/12/2020 to 4/12/2021

Type: **POSITION** – 6

Dear: Joe Perkins/ Allison Densmore

Forsyth County Policy requires that all probationary status employees receive a written performance evaluation prior to the end of their probationary period. In an effort to assure that the probationary review has been completed in a timely manner, please complete the attached probationary evaluation form. Be sure to indicate in the final section as to whether the probationary status is completed, if the probationary period is to be extended, or if termination is recommended. The supervisor is to meet with the employee to discuss and review all probationary evaluations performed. This evaluation should be used as a tool to bring attention to any performance areas of concern and to point out areas where the employee is performing above standard.

Once completed and signed off, please send original to my attention in Personnel Services.

Failure to complete and conduct a Probationary review by the end of the probationary period (if under initial hire probation-first year of employment) will result in the employee automatically satisfying their probationary period and becoming Civil Service eligible. Employees, having completed their initial one (1) year probation, but are serving under a position probation are already covered by Civil Service.

Thanks for your attention to this important matter.

If you have any questions, you may contact me at ext. 2806.

Sincerely,

Cheryl Robinson, PHR, SHRM-CP

Assistant Director of Personnel Services

Attachment

FORSYTH COUNTY GOVERNMENT PROBATIONARY EMPLOYEE EVALUATION

Date	Of Hire:	02/04/2019	Date of E	Eval: _	03/29/2021	
Emple	oyee's Name:	Mariana Botelho-Lipham	Position:	_	SO Admn Specialist Sr.	
Supe	rvisor's Name/Title	e: Allison Densmore	Type: Initial New Hire Mid-Year Evaluation (6 mo			
Department: Sheriff's Office - 2210		Initial New Hire Probation Evaluation (12 month				
1.	Job Duties &	Responsibilities:	Z	Position	on Probation Evaluation (6 months)	
Maria	ana's transition fro	ons Meets Expectations om Records to Open Records ha the efficiency of fulfilling open rec	s been wor	nderful.	ons Substantially Below Exp. She brought with her great ideas	
2.	Job Performa	ince:				
Maria	na always works		ce. She is	eager t	ons Substantially Below Exp. o assist others. She has also set ame page with requests.	
3.	Knowledge &	Professionalism:				
Maria	ana came to OPS	with a strong work ethic, compu	ter skills, a	and a gr	ons Substantially Below Exp. reat bit of knowledge in working in b, etc. She is always professional.	
4.	Time & Atten	dance:				
Maria	ana is punctual ar		nderstands		ons Substantially Below Exp. portance of getting the most urgent	
5.	Supervisor Co	omments & Goals for Improv	ement:			
Maria	na frequently pre	sents me with ideas and sugges	tions that w	vill mak	ons Substantially Below Exp. e the Open Records Unit work in a without being asked. She is gem.	
6.	Permanent S	tatus (check only if this perta	ains to pro	obation	nary status):	
	N/A (New	Hire mid-year evaluation)		<u> </u>	ecommend end of probation	
		Do not recomme	nd end of p	probatio	on	
	()	Extend probation by month	ıs.	()1	Fermination	
B	lling	me		03/29	/2021	
Super	visor Signature			Date		
_	1.1/2.			03	292021	
Depar	tment Head	1 0	Ţ	Date	(10 / 20 2)	
Emplo	yee Signature	wam	· i	<u>03</u> Date	121/2000	
Origina	al: Personnel Ser	vices Copy: Supervi	sory File		Copy: Employee	



Forsyth County Sheriff's Office Performance Evaluation

Non-Supervisor Evaluation Form

Employee's Name: Mariana Bot	eino-Lipnam	Rank: _	REC ADMI Unit: RECO	RDS Division: SUPP SERV			
Evaluator's Name: LESLIE BRAEMER Evaluation Period: From: 10/01/2019 To: 09/30/2020							
Evaluator's Rank: LEAD TAC	Evaluator's Rank: LEAD TAC Reason for Appraisal: Annual: X Probationary: Other:						
Appraisal Criteria - Rating Definition							
(5) Superior- Consistently exceeds stated (4) Excellent- Often exceeds the stand (3) Good- Consistently meets standard (2) Needs Improvement- Performance (1) Unsatisfactory- Does not meet acc	ard requirements of the s with acceptable perfore standards only partially	job, mance. y met.					
Jo			rating (1 = lowest - 5 = highest). ctors with ratings of 1, 2, or 5.				
Stress Management (5pts)	1 2 3 4	⊠ 5□	Interpersonal Skills (8pts)	1 2 3 4 🗙 5			
Tools & Equipment (5pts)	1 2 3 4	⊠ 5	Verbal Communications Skills	(8pts) 1 2 3 4 × 5			
Attendance (5pts)	1 2 3 4	× 5 □	Report Writing Skills (8pts)	1 2 3 4 🗴 5			
Grooming and Appearance (5pts)	1 2 3 4	□ 5×	Officer Safety (8pts)	1 2 3 4 5 5			
Dependability / Productivity (8pts)	1 2 3 4	□ 5×	Job Specific Duties (8pts)	1 2 3 4 5 5			
Decision Making Skills / Ability (8pts)	1 2 3 4	∑ 5□	Conduct and Demeanor (8pts)	1 2 3 4 5 5			
Problem Solving Abilities (apts)	1 2 3 4	⊠ 5∏	Professional Development (8pts	s) 1 2 3 4 5 X			
Employee's Overall Appraisal: Rating	percentage is calculat	ed based o	n 100 possible total points.				
	Total Points:	84.2	Score: <u>84%</u>	Average Rating: 4.21			
Employee Strengths							
Mariana is always up for a challenge. She is willing to learn tasks from other positions in the Sheriff's Office. She is a quick study and retains information well.							
Areas Needing Development / Impl	rovement						
She needs to make sure the course of action taken for one situation can be applied to another situation and that all of these are consistent.							
Action(s) to be taken							
Mariana needs to ask more questions to clarify one process may be different than another.							
Overall Comments							
Mariana is a pleasure to work with. She is smart, organized, and curious. Mariana gets along well with co-workers. She is continuing her education to further her career at the Sheriff's Office.							
PLEASE ATTACH ANY ADDITIONAL C	OMMENTS	 	WATER A STATE OF THE STATE OF T				

Mariana Botelho-Lipham

Performance Evaluation 2020

GROOMING AND APPEARANCE- Mariana's appearance is always neat and tidy.

DEPENDABILITY/PRODUCTIVITY- Mariana is always on task with her duties. She can process a large amount of work efficiently and timely. Mariana is always willing to learn new things and has no problem increasing her responsibilities. She learned the basic tasks that are required to be done to fill in the Inmate Records Unit position when needed. Mariana also filled in at HQ during a time of need for the Receptionist position. At the present time she is helping in the Open Records Unit due to an open position.

<u>PROFESSIONAL DEVELOPMENT-</u> Mariana is always open to learning new things. She will help with any other department so that she may learn something new. She is taking a course now to learn to speak Spanish. She is already fluent in several others.

Evaluator's Signature:
Division Commander's Signature: Comments: Date: 10/5/70
Bureau Commander's Signature:
Chief Deputy's Signature: Comments: Date: 4/0/200
Employee Certification: I hereby certify that my rating officer has discussed this appraisal with me and that I have been given an opportunity to submit a written statement within five (5) days of review. Employee's Signature: Title: Ad wind strand Date: 10/20/20 Assistant, Sr
- Indicates additional documentation is attached.



CHERYL ROBINSON, Assistant Director

2/4/19

January 3, 2020

Sheriff - Support Leslie Braemer

RE: Probationary Status Review for: Mariana Botelho-Lipham

Probationary Period: 2/4/2019 to 2/4/2020

Type: **PROBATION**

Dear: Leslie

Forsyth County Policy requires that all probationary status employees receive a written performance evaluation prior to the end of their probationary period. In an effort to assure that the probationary review has been completed in a timely manner, please complete the attached probationary evaluation form. Be sure to indicate in the final section as to whether the probationary status is completed, if the probationary period is to be extended, or if termination is recommended. The supervisor is to meet with the employee to discuss and review all probationary evaluations performed. This evaluation should be used as a tool to bring attention to any performance areas of concern and to point out areas where the employee is performing above standard.

Once completed and signed off, please send original to my attention in Personnel Services.

Failure to complete and conduct a Probationary review by the end of the probationary period (if under initial hire probation-first year of employment) will result in the employee automatically satisfying their probationary period and becoming Civil Service eligible. Employees, having completed their initial one (1) year probation, but are serving under a position probation are already covered by Civil Service.

Thanks for your attention to this important matter.

If you have any questions, you may contact me at ext. 2806.

Sincerely,

Cheryl Kobinson, PHR, SHRM-CP

Assistant Director of Personnel Services

Attachment

FORSYTH COUNTY GOVERNMENT PROBATIONARY EMPLOYEE EVALUATION

Date O	f Hire:	02/04/2019	Date of Eval:	01/21/2020
Employ	/ee's Name:	Mariana Botelho-Lipham	Position:	Records Admn Specialist
Superv	Supervisor's Name/Title: Leslie Braemer		Type: Initia	New Hire Mid-Year Evaluation (6 months)
Departi	Department: 2270 Headquarters			New Hire Probation Evaluation (12 months)
1.	Job Duties & F	Responsibilities:	Posit	on Probation Evaluation (6 months)
Manan	a knows what he	ns / Meets Expectations eds to be done and does it efficitake on more responsibilities.	Below Expectati ently and in a tin	ons Substantially Below Exp. nely manner. She is always willing
2.	Job Performan	ice:		
Exc Mariana	ceeds Expectation is very thorough	ns _/ Meets Expectations n in her work and makes very fee	Below Expectati w errors.	ons Substantially Below Exp.
3.	Knowledge &	Professionalism:		
Marian	ceeds Expectation a is always very to be done and d	professional with co-workers and	Below Expectati d customers. Sh	ons Substantially Below Exp. e has a good knowledge of what
4.	Time & Attend	ance:		
Exc Marian	eeds Expectation	ns _/ Meets Expectations I only takes pre-approved time o	Below Expectation	ons Substantially Below Exp.
5.	Supervisor Co	nments & Goals for Improve	ment:	
Exc Mariana	eeds Expectation a is a key part of	is _/_ Meets Expectations the Records Unit. I would like to	Below Expectations see her take a contract of the see her take	ons Substantially Below Exp.
6.	Permanent Sta	itus (check only if this pertal	ns to probatio	nary status):
	N/A (New H	lire mid-year evaluation)	<u> </u>	ecommend end of probation
r		Do not recommend	d end of probation	on
L	()(ktend probation by months	. ()	Termination
	Melle 1º	alebrul		117/20
	Son Signature	6	Date Date	1/25/2020
Employe	ee Signature	phan	1	/23/2020
	Personnel Servi	ces Copy: Superviso	Date ory File	Copy: Employee

Forsyth County Sheriff's Office Performance Evaluation

Non-Supervisor Evaluation Form

Employee's Name: Mariana Bote	elho-Lipham	Rank: Rec	Ad Sp Unit:	Records	Division:_	OPS
Evaluator's Name: Leslie Braeme	r	Evaluation	Period: From:	10/01/2018	3 To:	09/30/2019
Evaluator's Rank: Lead TAC	Reason for Appra	isal: Annu	al: X Probatio	onary: Oth	ıer:	
Appraisal Criteria - Rating Definitions				. ,		
(5) Superior-Consistently exceeds star (4) Excellent-Often exceeds the standard			mance.			
(3) Good-Consistently meets standards	with acceptable perform	mance.				
(2) Needs Improvement-Performance (1) Unsatisfactory-Does not meet acce	standards only partially eptable level of performa	met, ince expectati	ions.			
Joi	b Factors - Check the ap Comments required fo					
Stress Management (5pts)	1 2 3 4		nterpersonal Skills	(8pts)	1 2 3	4× 5
Tools & Equipment (5pts)	1 2 3 4	X 5 V	erbal Communicat	ions Skills (8pts)	1 2 3	4 × 5
Attendance (5pts)	1 2 3 4	5 X R	Report Writing Skills	S (8pts)	1 2 3	X 4 5
Grooming and Appearance (5pts)	1 2 3 4	X 5 0	Officer Safety (8pts)		1 2 3	X 4 5
Dependability / Productivity (8pts)	1 2 3 4	X 5 J	ob Specific Duties	(8pts)	1 2 3	4 × 5
Decision Making Skills / Ability (8pts)	1 2 3 4	X 5 C	Conduct and Deme	anor (8pts)	1 2 3	4 × 5
Problem Solving Abilities (8pts)	1 2 3 4	X 5 P	Professional Develo	opment (8pts)	1 2 3	4 X 5
Employee's Overall Appraisal: Rating	nementane is calculat	ed based on t	100 possible total r	noints		
Employee a Creatal Applaisate framig	-				Average Rating	. 3.89
	Total Points:		_ Score:	1070 /	Average Raung	<u>. 0.00</u>
Employee Strengths						
Marianna is still relatively new to the Records Unit. She is always pleasant and courteous to co-workers and the public. She was recognized from a citizen for her helpful and prompt service to him. Marianna is able to keep up with her, at times, large workload without becoming overwhelmed. She is always on time and here when she is supposed to be.						
Areas Needing Development / Improvement						
I would like to see Marianna learn all aspects and functions of the Records Unit.						
Action(s) to be taken						
Accorded to no taken						
Overall Comments						
Marianna takes excellent notes and has helped create a manual, in great detail, for the Records Unit. She is a valuable						
iviarianna takes excellent notes a	nd has helped creat	e a manual	l, in great detaii,	for the Record	is Unit. She is	a valuable
asset to the Sheriff's Office. Maria	nd has helped creat anna can be depend	e a manual led on to ge	l, in great detail, et her job done i	for the Record n a timely and	is Unit. She is efficient manr	a valuable ner.
asset to the Sheriff's Office. Maria	nd has helped creat anna can be depend	e a manual led on to ge	l, in great detail, et her job done i	for the Record n a timely and	is Unit. She is efficient manr	a valuable ner.

PLEASE ATTACH ANY ADDITIONAL COMMENTS

Additional Comments

Dependability/ Productivity- Her work is always done in a timely manner. Marianna has assisted with tasks that are not normally her daily task to complete. When manpower has been stretched, she has been able to assist in keeping things caught up.
Professional Development- Marianna has been instrumental in completing a "how to" manual for the Records
<u>Unit</u>
· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·
<u> </u>
,

Page 2 of 3 FCSO PE1801-R

Evaluator's Signature:	Date: 10 9 9
Division Commander's Signature:	Date: 10/9/19
Comments:	
Bureau Commander's Signature:	Date: 10/13/19
Comments:	
Chief Deputy's Signature:	Date: 1011119
Comments:	
Employee Certification: I hereby certify that my rating officer has discussed this appraisal with me submit a written statement within five (5) days of review.	
Employee's Signature: Model Philipham Title: Record 5 pecies	5 Admin Date: 10/29/19
Employee Comments, Goals, and Objectives:	
_	
- Indicates additional documentation is attached.	



CHERYL ROBINSON, Assistant Director

August 1, 2019

Sheriff - Support Leslie Braemer

RE: Six (6) Months Review For: Mariana Botelho-Lipham

Probationary Period Ending: 2/4/2020

Due Date: 09/04/2019

Dear: Leslie

Forsyth County Civil Service Policy states that all one-year initial probationary status employees shall be formally evaluated and counseled after six (6) months of employment. In an effort to assure that the probationary six months review has been completed in a timely manner, please complete the attached probationary evaluation form. The supervisor is to meet with the employee to discuss and review the probationary six months reviews that has been performed. This evaluation should be used as a tool to bring attention to any performance areas of concern and to point out areas where the employee is performing above standard.

Once completed and signed off, please send original to my attention in Personnel Services.

Thanks for your attention to this important matter.

If you have any questions, you may contact me at ext. 2806.

Sincerely,

Cheryl Robinson, PHR, SHRM-CP

Assistant Director of Personnel Services

Attachment

FORSYTH COUNTY GOVERNMENT PROBATIONARY EMPLOYEE EVALUATION

Date Of Hire:	02/04/2019	Date of Eval:	08/15/2019	
Employee's Name:	Mariana Botelho-Lipham	Position:	Records Admn Specialist	
Supervisor's Name/Title	: Leslie Braemer/Lead TAC		New Hire Mid-Year Evaluation (6 months)	
Department:	Sheriff's Office - HQD		New Hire Probation Evaluation (12 months)	
1. Job Duties &	Responsibilities:		on Probation Evaluation (6 months)	
Exceeds Expectatio Mariana knows what ne	ns _/ Meets Expectations seds to be done and does it effici	Below Expectation	ons Substantially Below Exp.	
2. Job Performa	ice:			
Exceeds Expectation Mariana is very thorough	ns _/ Meets Expectations n in her work and makes few erro	Below Expectations	ns Substantially Below Exp.	
3. Knowledge &	Professionalism:			
Exceeds Expectation Manana asks questions functions of the Records	is / Meets Expectations and lasks excellent notes. She to 3 Unit.	Below Expectation has a good basic	ns Substantially Below Exp. knowledge of her job and the	
4. Time & Attend				
Exceeds Expectation		Below Expectation	ns Substantially Below Exp.	
5. Supervisor Con	nments & Goals for Improve:	nent:		
Exceeds Expectations Mariana is a vital and imp	Meets Expectations B	lelow Expectation She is a pleasure	is, Substantially Below Exp.	
6. Permanent Stat	us (check only if this pertain	s to probation:	ary status):	
N/A (New Hi	re mid-year evaluation)		commend end of probation	
Do not recommend end of probation				
Supermor Signature	end probation by months.	() Te	7/26/19	
Department Head The Line Line Employee Signature	ham	Date Oate	7/03/19	

Original: Personnel Services

Copy: Supervisory File

Copy: Employee



Date:

Forsyth County Personnel Services

Attached is a copy of your Job Description. Please sign this form to acknowledge receipt of your Job Description.

Print Name:	Mariana Botelho-Lipham	
Signature:	Ablehlohipham	

Title of Job Description

Records Administrative Specialis





110 EAST MAIN STREET, SUITE 230 • CUMMING, GA 30040 • 770.781.3088 • FAX 770.205.4698

State of Georgia	}		
County of Forsyth	}		
	Loyalty Oath		
ı, Mariana Botel	ho-Lipham	_ (print name) a citizen of the	
United States of	America, and being an em	ployee of Forsyth County,	
Georgia, and the	recipient of public funds	for services rendered as such	
employee, do he	reby solemnly swear and	affirm that I will support the	
Constitution of the United States and the Constitution of Georgia.			
Signature of Employee:	Bolillohi plam		
Sworn to and subscribed before me this 4 day of Jebruary, 200 2019 Notary Public: Lalle Challer My Commission expires: 1-25-2000			
My Commission expires:	1-25-2000	-	



Cs/eebk8-06

FORSYTH COUNTY PERSONNEL SERVICES DEPARTMENT

110 East Main Street, Suite 230 Cumming, GA 30040 770-781-3088 / fax 770-781-2113

Civil Service and Employee Handbook

My signature below is acknowledgement of receipt of the Forsyth County Employee Handbook and the Forsyth County Civil Service Handbook in the format as designated below:
Hard copy Electronically located on the county's Intranet
I understand the Forsyth County Employee Handbook is intended to apply to all employees of Forsyth County regardless of whether or not the employee is covered by the Forsyth County Civil Service System at anytime during employment.
I further acknowledge that I am responsible for reading, understanding and following the rules and regulations as set forth in the handbooks. I understand I am also responsible for seeking guidance from a supervisor if any provisions of these rules and regulations are unclear.
I understand a hard copy of the Forsyth County Employee Handbook and the Forsyth County Civil Service Handbook is available through the Personnel Services Department and also available electronically on the Forsyth County Intranet.
Printed Name of Employee: Mariana Botelho-Lipham
Signature of Employee: Bolul tohipham
Date of Signature: 02/04/19 Personnel Services Dept.: KChaller
(Sign and return to the Personnel Services Dept.)



Forsyth County Personnel Services

I hereby voluntarily agree to submit to any lawful drug/alcohol test requested and conducted by Forsyth County which Forsyth County deems, in its sole discretion, to be reasonably necessary to provide its workers with a safe working environment.

I acknowledge that in the course of my employment, and as a prerequisite of employment with Forsyth County, I may be asked to submit to a random drug/alcohol test or reasonable suspicion testing, either of which will require that I provide a urine, blood or breath sample as part of a substance abuse screening test.

I understand that refusal to submit to a drug and alcohol test as required herein shall be subject to termination. I further understand that refusal to be escorted or failure to appear at the designated collection site to take the test when so directed shall also be subject to termination. Refusal can include the inability to provide a sufficient urine specimen, breath or saliva sample without a valid medical explanation, as well as a verbal declaration, obstructive behavior, or physical absence resulting in the inability to conduct the test.

I authorize that the results of any drug/alcohol test be communicated and disclosed to third parties. As a consequence of any positive result obtained by said test, I understand that I may not be offered a job with Forsyth County or may be disciplined in accordance with the Policies of the Forsyth County Civil Service System, leading up to and including immediate discharge if currently employed by Forsyth County.

I hereby indemnify, release and forever discharge and hold Forsyth County and its subsidiaries and affiliated companies, agents and employees harmless from any and all claims, demands, judgments and legal fees arising out of or in connection with such tests, the results, or any lawful use of the results.

Signature of Applicant or Employee: Bold blapham

Printed Name of Applicant or Employee: Mariana Botelho-Lipham

Date: 02/04/19

Witness Signature: KChaller





Forsyth County Personnel Services

110 EAST MAIN STREET, SUITE 230 • CUMMING, GA 30040 • 770.781.3088 • FAX 770.205.4698

LEGALLY OBTAINED DRUGS POLICY

A "legally obtained drug" includes prescription drugs and over-the-counter drugs. A "prescription drug" means any substance that is attainable only by lawful prescription from a physician. "Over-the-counter" medication includes any substance that does not require a prescription, but which has the capacity to affect a person physically, mentally, or emotionally or which could otherwise affect a person's ability to perform.

Employees must not be on the job, on call, on County Premises, operating county equipment or vehicles, or operating any other equipment or vehicle while on County business while impaired due to any drug, legal or illegal, that renders the employee unfit for duty. An employee is "unfit for duty" if, in the County's opinion, the employee's use of legally obtained drugs jeopardizes his or her ability to work safely and efficiently. An employee who is using legally obtained drugs must notify his or her immediate supervisor of any and all symptoms and probable adverse side effects that may render him or her unfit for duty. An employee's failure to so notify the County constitutes grounds for disciplinary action, up to and including, termination. If any employee's medically required use of legally obtained drugs renders the employee unfit for duty and, in the opinion of the county, a temporary alternative job assignment is not available, the employee will be considered unfit for duty.

Employees using legally obtained drugs while on the job shall do so in strict accordance with physician and/or manufacturer's directions. It is the employee's responsibility to notify the prescribing physician of the duties required by the employee's position and to ensure that the physician approves the use of the prescription medication while the employee is performing his or her duties.

The abuse and/or inappropriate use of legally obtained drugs during assigned work hours or on County Premises shall be prohibited and is a disciplinary matter. Job performance or attendance deficiencies resulting from abuse and/or inappropriate use shall be cause for disciplinary action.

Mariana Botelho-Lipham		
Print Name	Signature of Employee	
	02/04/19 Date	

This is to acknowledge that the above-signed employee is responsible for reading, understanding and following this policy. The above-signed employee is also responsible for seeking guidance from a supervisor if any provisions of this policy is unclear.

FORSYTH COUNTY SHERIFF'S OFFICE

Ron H. Freeman, Sheriff

The current insurance carrier for Forsyth County vehicles require the following:

I am fully aware of Georgia Law O.C.G.A. §40-8-76.1 and Forsyth County Sheriff's Office Policy 5-3.2 regarding the use of seat belts that specifies all occupants of agency owned or leased vehicles will wear seat belts during operation.

Mariana Botallo - Lipham Employee Name (print)	Employee #
Employee Signature	02/04/19 Date
KChaller Supervisor Signature	2-4-19 Date

Revised-4/19/16

GEORGIA CRIME INFORMATION CENTER AWARENESS STATEMENT

Access to Criminal Justice Information, as defined in GCIC Council Rule 140-1-.02 (amended), and dissemination of such information are governed by state and federal laws and GCIC Council Rules. Criminal Justice Information cannot be accessed or disseminated by any employee except as directed by superiors and as authorized by approved standard operating procedures which are based on controlling state and federal laws, relevant federal regulations, and the Rules of the GCIC Council.

O.C.G.A. §35-3-38 establishes criminal penalties for specific offenses involving obtaining, using, or disseminating criminal history record information except as permitted by law. The same statute establishes criminal penalties for disclosing or attempting to disclose techniques or methods employed to ensure the security and privacy of information or data contained in Georgia criminal justice information systems.

The Georgia Computer Systems Protection Act (O.C.G.A. §16-9-90 et seq) provides for the protection of public and private sector computer systems, including communications links to such computer systems. The Act establishes four criminal offenses, all major felonies, for violations of the Act:: Computer Theft, Computer Trespass, Computer Invasion of Privacy, and Computer Forgery. The criminal penalties for each offense carries maximum sentences of fifteen (15) years in prison and/or fines up to \$50,000.00, as well as possible civil ramifications. The Act also establishes Computer Password Disclosure as a criminal offense with penalties of one (1) year in prison and/or a \$5000.00 fine.

The Georgia Criminal Justice Information System Network is operated by the Georgia Crime Information Center in compliance with O.C.G.A. §35-3-31. All data bases accessible via CJIS Network terminals are protected by the Computer Systems Protection Act. Similar communications and computer systems operated by municipal/county governments are also protected by the Act.

By my signature below, I acknowledge that I have read and understand this Awareness Statement.

Print Name: <u>Mariana Bst</u>	ello-Lipham
Signed: Ballbligham	Date: 02/04/19
O.	
Witnessed: Kchaller	Date: 2-4-19

E-MAIL USAGE MEMORANDUM

Forsyth County and the Sheriff's Office provide e-mail services to better assist employees in completing their job junctions. However, abuse of such services can be detrimental to the operations of the Sheriff's Office and the county. When using the county provided e-mail, employees should follow these guidelines:

- County e-mail is for official county business only. Employees will refrain from sending e-mails that do not pertain to official county business that the employee is actively involved in. At no time should county e-mail be used as a form of general chat.
- 2. Employees should only provide their county e-mail addresses to those persons who have official business with the county. County e-mail addresses should not be provided to friends, family, or other persons who do not have business with the county.
- 3. Employees must be mindful that any and all e-mails are subject to open records and any statements, opinions, or general observations made in an e-mail reflect directly on the agency. Therefore, employees should only respond to e-mails in a professional manner that reflects the values and mission statement of the agency.
- 4. Employees should not attach information or links to websites that do not directly affect their current job assignment. Articles of general interest should not be shared using county e-mails. Outside articles and links dealing with officer safety issues or legal reviews/updates should be directed to the Training Division so they can determine the correct method of delivery of such information.
- 5. Employees will not impersonate other employees by sending e-mails from their accounts as a form of a joke. Employees who find unlocked workstations should log off that employee or lock the workstation immediately.

If you have any questions or concerns, please direct those to your supervisor for guidance.

Signature: Boullstophom	Print Name: Mariana Botello-Liphan
Date: <u>02/04/19</u>	





Forsyth County Personnel Services

110 EAST MAIN STREET, SUITE 230 • CUMMING, GA 30040 • 770.781.3088 • FAX 770.205.4698

Your signature below acknowledges receipt of the Purchasing Policies and Procedures for Forsyth County.

You further acknowledge that you are responsible for reading, understanding and following these policies. If any provision of these policies are unclear to you, you understand it is your responsibility to seek guidance from your supervisor.

Mariana Botelho-Lipham	
Employee Name (Please Print)	
Mobillohipham	
Signature of Employee	
02/04/19	
Date	
Kchaelu	
Personnel Services Representative	



FORSYTH COUNTY SHERIFF'S OFFICE

Ron H. Freeman, Sheriff

Mariana Botolles-Liplam			
Employee Name	Employee Number	٠ -	Badge Number

- 1. I acknowledge that on this date, I have been notified that the Forsyth County Sheriff's Office Employee Manual (SOPs) is available for review on Power DMS. In addition the Forsyth County Civil Service Handbook can be found on Power DMS.
- 2. Forsyth County IT Policies and Purchasing Policies can be found on the "S" Drive.
- 3. By signing this form, I acknowledge that I have been notified of these policies. I am aware that this signed form will be kept in my personnel file located in Employee Records at the Forsyth County Sheriff's Office.

Bakelus Lipham 02/04/19
Employee Signature Date



EMPLOYMENT APPLICATION

FORSYTH COUNTY

110 East Main Street Suite 230 Cumming, Georgia 30040 (770) 781-3088

http://agency.governmentjobs.com/forsyth/default.cfm

Botelho-Lipham, Mariana 01429 RECORDS ADMINISTRATIVE SPECIALIST

Received: 9/24/18 9:59
For Official Use Only:
QUAL:
DNQ:
□ Experience
□Training
Other:

	PERSONAL INFORM	ATION
POSITION TITLE: RECORDS ADMINISTRATIVE SPECIA	ALIST	EXAM ID#: 01429
NAME: (Last, First, Middle) Botelho-Lipham, Mariana		SOCIAL SECURITY NUMBER:
ADDRESS: (Street. Citv. State. Zip Code)		EMAIL ADDRESS:
HOME PHONE:	ALTERNATE PHONE:	NOTIFICATION PREFERENCE: Email
DRIVER'S LICENSE: ■ Yes □ No	DRIVER'S LICENSE: State: GA Number: 056618350	LEGAL RIGHT TO WORK IN THE UNITED STATES? ■ Yes □ No

PREFERENCES	
WHAT TYPE OF JOB ARE YOU LOOKING FOR? Regular	
TYPES OF WORK YOU WILL ACCEPT: Full Time,Part Time	
SHIFTS YOU WILL ACCEPT: Day	
OBJECTIVE:	

Multilingual Office Manager and administrator with proven leadership experience. Proficient in cross functional support with efficient work habits. Career history of exceeding expectations with providing solutions to management while enhancing customer satisfaction, increasing profitability and delivering cost reduction strategies. A professional who is results oriented, deadline driven and focused on overcoming obstacles.

	EDUCATION	
DATES: From: To:	SCHOOL NAME: Gwinnett Technical College	
LOCATION:(City, State) Lawrenceville , Georgia	DID YOU GRADUATE? ■Yes □No	DEGREE RECEIVED: Professional
MAJOR: Business Management, Operations N	Management	UNITS COMPLETED:
DATES: From: To:	SCHOOL NAME: Atlanta Technical College	
LOCATION:(City, State) Atlanta , Georgia	DID YOU GRADUATE?	DEGREE RECEIVED: Professional
MAJOR: Graphic Design		UNITS COMPLETED:
DATES: From: To:	SCHOOL NAME: Fundacao Instituto Tecnologico de Osasco	
LOCATION:(City, State) Osasco , International	DID YOU GRADUATE? ■Yes □No	DEGREE RECEIVED: High School Diploma

WORK EXPERIENCE		
DATES: From: 7/2014 To: Present	EMPLOYER: SCM North America	POSITION TITLE: Administrator Coordinator
ADDRESS: (Street, City, State, Zip C Duluth, Georgia, 30096	lode)	COMPANY URL:
DUONE NIIMBED	SUPERVISOR: Luigi - Campanelli	MAY WE CONTACT THIS EMPLOYER? ■Yes □No
HOURS PER WEEK: 40	SALARY: \$0.00/month	# OF EMPLOYEES SUPERVISED:

Mariana Botelho-Lipham	\bigcirc	Person ID: 32837607	0	Received: 9/24/18 9:59 PM
Answer incoming calls and emails Communicate daily in their native Italy, and Brazil. Develop and monitor weekly servi weekly. Supervise, train and mentor a tea Improve customer service quality	languages with coword ce schedule for 54 Te m of four Office Admi-	rkers, customers, and ager chnicians in US and Mexico nistrators in high volume s	its from all over the United S Schedule travel, audit and a ervice call center and A/R.	tates, Canada, Mexico,
REASON FOR LEAVING: I recently moved to Forsyth County	and I am looking for	a job opportunity close to	my new home.	
DATES:	EMPLOY	'ER:	POSITION TITL	E: ector and Web Master
From: 10/2009 To: 1/2014 Living City Magazine Assistant Art Dire ADDRESS: (Street, City, State, Zip Code) COMPANY URL:				
Hyde Park, New York PHONE NUMBER:	(SUPERV	TSOR:	MAY WE CONTA	ACT THIS EMPLOYER?
			■Yes □No	
HOURS PER WEEK: 20	\$ALARY \$0.00/n		# OF EMPLOYE	ES SUPERVISED:
• Project lead for upgrading company website. Launched new website 4 months in advance of the plan. • Project lead for upgrading company website. Launched new website 4 months in advance of the plan. • Project lead for upgrading company website. Launched new website end user requests while providing a more scalable system to allow for future growth. • Acquired 10% of the Organization's Social Media market. Leverage the use of Facebook, Twitter, and other review channels to boost positive reviews and increase customer fan base. • Assisted in developing the design for the publication using InDesign, Photoshop, and Illustrator; • Created ads and book covers for extra publications of the magazine; • Reviewed and approved freelancer's portfolios; • Maintained and developed the website. **REASON FOR LEAVING:** I started to work at SCM North America **CERTIFICATES AND LICENSES** **Nothing Entered For This Section** **Skills** **OFFICE SKILLS:** Typing:40 Data Entry:10000 **OTHER SKILLS:** Microsoft Office 365 Full Version - Expert - 15 years and 0 months**				
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I	Expert - 15 years and	0 months		
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read	iate - 5 years and 0 m d 0 months s and 0 months re	0 months nonths	•	
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Spanish - Speak Read Writ	iate - 5 years and 0 m d 0 months s and 0 months e Write ite	0 months nonths	•	-
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read	iate - 5 years and 0 m d 0 months s and 0 months e Write ite te	nonths	•	
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Spanish - Speak Read Writ	iate - 5 years and 0 m d 0 months s and 0 months e Write ite te	0 months nonths	ON:	
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ English - Speak Read Writ	iate - 5 years and 0 m d 0 months s and 0 months ee Write iite te	nonths	ON!	4
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ Fortuguese - Speak Read Writ Speak Read Writ Honors & Awards Member of the National Technical I	iate - 5 years and 0 m d 0 months s and 0 months ee Write iite te	nonths		
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ Fortuguese - Speak Read Writ Fortuguese - Speak Read Writ Write Read Writ Honors & Awards Member of the National Technical F	iate - 5 years and 0 m d 0 months s and 0 months e Write ite te AD	DOITIONAL INFORMATIO		
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ English - Speak Read Writ Honors & Awards Member of the National Technical F	iate - 5 years and 0 m d 0 months s and 0 months e Write ite te AD Honor Society	DOITIONAL INFORMATIO		
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ Fortuguese - Fortuguese - Speak Read Fortuguese -	iate - 5 years and 0 m d 0 months s and 0 months e Write ite te AD Honor Society	DOITIONAL INFORMATIO	POSITION:	
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ Fortuguese - Speak Read Fortuguese - Writ Fortuguese - Fortuguese - Fortuguese - Writ Fortuguese - Fortugese - Fortuguese - Fortuguese - Fortuguese - Fortuguese - Fortug	iate - 5 years and 0 m d 0 months s and 0 months de l Write rite tte AE Honor Society NAME:	DOITIONAL INFORMATIO	POSITION:	
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ Fortuguese - Fortuguese - Speak Read Fortuguese -	iate - 5 years and 0 m d 0 months s and 0 months e Write ite te AD Honor Society	DOITIONAL INFORMATIO	POSITION:	
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ Fortuguese - Speak Read Fread F	iate - 5 years and 0 m d 0 months s and 0 months e Write ite AE donor Society NAME: NAME:	DOITIONAL INFORMATIO	POSITION:	
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ Fortuguese - Speak Read Fortuguese - Speak Read Fortuguese - Writ Fortuguese - Speak Read Fortuguese - Writ Fortuguese - Speak Fortuguese - Writ Fortuguese - Fortuguese - Fortuguese - Writ Fortuguese - Fortuguese - Fortuguese - Fortuguese - Writ Fortuguese - Fortugese - Fortuguese - Fortuguese - Fortuguese - Fortuguese - Fortugese - Fortuguese - Fortuguese - Fortuguese - Fortuguese - Fortug	iate - 5 years and 0 m d 0 months s and 0 months e Write ite AE donor Society NAME: NAME:	DOITIONAL INFORMATIO	POSITION:	R:
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ Fortuguese - Speak Read Fortugese Fortuguese - Speak Read Fortugese Fortuguese - Speak Read Fortugese Fortuguese - Fortugese Fortuguese - Fortugese Fortugese - Fo	iate - 5 years and 0 m d 0 months s and 0 months e Write ite te AD Honor Society NAME: Code)	PDITIONAL INFORMATIONAL INFORM	POSITION: PHONE NUMBER POSITION: PHONE NUMBER POSITION:	R
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ Fortuguese - Speak Read Fortugese Fortuguese - Speak Read Fortugese Fortuguese - Speak Read Fortugese Fortuguese - Fortugese Fortuguese - Fortugese Fortuguese - Fortugese Fortug	iate - 5 years and 0 m d 0 months s and 0 months de Write ite te AD Honor Society NAME: Code NAME: Tadesse	DOITIONAL INFORMATIO	PHONE NUMBER POSITION: PHONE NUMBER	R
Typing:40 Data Entry:10000 OTHER SKILLS: Microsoft Office 365 Full Version - I Adobe Design Premium - Intermed Oracle - Intermediate - 4 years and Google Platforms - Expert - 7 years LANGUAGE(S): Italian - Speak Read Writ Portuguese - Speak Read Writ Portuguese - Speak Read Writ Fortuguese - Speak Read Fortuguese Fortuguese - Speak Read Fortuguese Fortuguese - Speak Read Fortuguese Fortuguese - Speak Fortuguese Fortuguese - Fortugese Fortuguese - Fortuguese Fortuguese - Fortuguese Fortuguese	iate - 5 years and 0 m d 0 months s and 0 months e Write ite te AD Honor Society NAME: Code NAME: Tadesse Code)	PDITIONAL INFORMATIONAL INFORM	POSITION: PHONE NUMBER POSITION: PHONE NUMBER POSITION:	R: atician – CDC

Mariana Botelho-Lipham	Person ID: 328376	S07 Received: 9/24/18 9:59 PM
REFERENCE TYPE: Professional	NAME: Glenda Smart	POSITION:
ADDRESS: (Street, City, State 1275 Peachtree St. NE, Atlant		
EMAIL ADDRESS:		PHONE NUMBER:

Person ID: 32837607

Received: 9/24/18 9:59 PM

Agency-Wide Ouestions

1. Are you at least 18 years of age?

Yes

2. Are you willing to accept the posted starting salary of this position?

Ye:

3. Are you willing to work shift work (nights, holidays, weekends, etc.)?

No

4. Are you directly or indirectly related to anyone currently employed by Forsyth County Government? This does not include anyone employed by the Forsyth County Board of Education.

No

- 5. If so, please list name of relative and relationship to you: Please answer this question completely.
- 6. Are you currently authorized to work for Forsyth County without our sponsoring you under US Immigration Law?
 Yes
- 7. Have you ever been convicted of or pleaded guilty or nolo to a felony or misdemeanor, including DUI?
 - If you answered yes to the above please list all convictions/charges below. If you answered no please type "NA" below.
- 8. Conviction of a crime will not necessarily disqualify you from employment, but incomplete disclosure will result in any tentative offers being recinded.

NO

9. Have you incurred any traffic charges within the last seven years? If so, please list dates and types of charges.

NC

10. Has your driver's license ever been suspended or revoked? if yes please give reason:

NC

- 11. Active Military Service (list date, serial or service number for all active service)
- Have you ever been employed by Forsyth County Government before? If yes, give job title, supervisor, and dates of employment. If previous service is not indicated upon rehire, time will not be bridged. For employment dates prior to 1999 employee must provide corroborating documentation if rehired.

NO

13. How did you learn of this employment opportunity?

County website

I confirm that I have included the following information on this employment application: o Complete education history o

14. Work history o Professional references (no less than 3) I also understand that if any of the above information is missing from my employment application it will be considered incomplete and will be rejected.

Confirm

15. Are you currently employed by the Forsyth County Board of Commissioners?

Nο

Job Specific Supplemental Questions

Failure to accept the acknowledgement statement below will result in your employment application being rejected. Your application for this employment opportunity will not be considered if you do not abide by the statements below.

COMPLETED APPLICATION ACKNOWLEDGEMENT: I acknowledge that I must complete all sections of the employment application. I understand that failure to enter all relevant work experience in the work history section of the application will result in rejection of my employment application. I also understand that I must include three professional references to whom I am not related.

Furthermore, I understand that Forsyth County does not accept resumes in lieu of completed applications.

Yes, I acknowledge this statement

2. Do you have a high school diploma or a G.E.D?

Yes

Do you have a valid driver's license?

Yes

If you have not listed three professional references please do so prior to submitting your application. Changes cannot be made to an application after it has been submitted. If your application is submitted without three professional references it will be rejected for being incomplete. Do you understand this requirement?

Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button, I hereby certify that every statement I have made in this application is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the U.S. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of Forsyth County and will not be returned. I understand that Forsyth County may contact prior employers and other references. I understand that I must notify the Human Resources Division of any changes in my name, address, or phone number.

This application was submitted by Mariana Botelho-Lipham on 9/24/18 9:59 PM



FORM#1 SUBSTANCE ABUSE TESTING NOTICE

AUTHORIZATION AND RELEASE FOR FORSYTH COUNTY EMPLOYMENT APPLICANTS

*THIS DOCUMENT MUST BE SIGNED IN THE PRESENCE OF A WITNESS. THE WITNESS CAN BE ANYONE INCLUDING FAMILY MEMBERS AND FRIENDS.

I hereby acknowledge that I have applied for employment with Forsyth County, Georgia, and I have been informed that a substance abuse test is required for this employment.

I agree to provide all necessary samples of body fluid and to otherwise cooperate in all respects with the collection and testing procedures.

I authorize the county physician or other responsible entities performing or assisting in the testing procedure to release the results of any substance abuse test to the Forsyth County Sheriff's Office and to Forsyth County.

I authorize the Forsyth County Sheriff's Office and Forsyth County to receive and review the results of any substance abuse test.

I realize that failure to appear at the designated time or failure to take the test or cooperate with the testing or collection procedure will disqualify me from further consideration for employment with the Forsyth County Sheriff's Office.

I HAVE CAREFULLY READ THIS DOCUMENT AND I UNDERSTAND THIS DOCUMENT,

Boldolipham	10/01/2018
Signature of Applicant "(Sign in the presence of a witness)	Dat e
Mariana-Betello-Lipham Printed name of Applicant	
Social Security Number	
42	
Vitness Signature	

Revised 01/08/15

FORSYTH COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER

FORM#1



FORM#2 FORSYTH COUNTY SHERIFF'S OFFICE AFFIDAVIT OF APPLICATION

As the applicant, I state that I understand and/or certify the following:

1. That if I do not wish to answer a question in the application process, I may do so; however, my application will not be processed.

2. Exclusive of the aforementioned statement, all information that is recorded in the application process will be used in relation to consideration or qualification of the applicant for employment only, and no other purpose.

3. That I have read and understand all questions and instructions in this application and that my answers during the application process are true and complete to the best of my knowledge and belief.

4. That truthful and complete responses in the application process are required.

5. That discovery of intentional omissions or incorrect answers may be the basis for the termination of the application process and may result in criminal prosecution for the offense of False Statements under Georgia Code Section 16-10-20, a felony punishable by a maximum fine of \$1,000.00 or imprisonment of not less than one (1) or more than five (5) years, or both; or for the offense of False Swearing under Georgia Code Section 15-10-7, a felony punishable by a maximum fine of \$1,000.00 or imprisonment of not less than one (1) or more than five (5) years, or both.

6. That falsification during the application process by an individual hired may result in termination of

employment with this agency.

7. That the Forsyth County Sheriff's Office operates within the scope of a Standard Operating Procedure (SOP) and if an offer of employment is made and accepted, the applicant agrees to work in accordance with these policies and procedures.

8. That all information provided will be verified either by interview, testing, psychological testing, medical examination, drug screening, polygraph examination, and/or computer verification of driver's/criminal

history and driver's license status.

9. I understand that if offered employment, my probation period will be one year as stated in the Forsyth County Civil Service Manual. In the event I achieve agency work performance standards within the probationary period, I will be classified as a regular employee. I also understand as a regular employee, should my work performance fall below agency standards, that I may be disciplined, up to and including termination. I further understand that if I am terminated, I must return all property issued to me by the Forsyth County Sheriff's Office, or make suitable restitution for same.

10. That I may be terminated for any good and sufficient cause, to include, but not limited to, criminal activity or violation of Sheriff's Office policies and procedures. I understand that I may have appeal rights as provided for in the Forsyth County Sheriff's Standard Operating Procedures Manual and the Forsyth County Civil Service Manual.

10/01/2012 Applicant's Signature (Sign in the presence of the Motory) Date

Before me personally appeared the above said person who says that he/she executed the above Affidavit of his/her own accord, with full knowledge of the purpose therefore.

Sworn to and subscribed before me this

Notary Public's Signature

(Place Commission Information and Seally)

White Contraction is the contraction of the contrac

FORM#5 FCRA Disclosure and Authorization

- Under the FCRA (Fair Credit Reporting Act), before the Company can obtain a consumer report or investigative consumer report about you for employment purposes, we must have your written authorization.
- I am aware I have the right to make a written request to Professional Screening & Information, Inc., Post Office Box 644, Rome, Georgia 30162; call them collect at 1-877-235-7574, or contact them via the internet at www.psibackgroundcheck.com to obtain a free copy of my background investigation, within a reasonable period of time, if an employment decision has been influenced by information contained in a background investigation report.

• In addition, a summary of your rights will be made available to you under the Fair Credit Reporting Act.

 California, Oklahoma, and Minnesota residents are entitled to a free copy of their consumer report upon request and will be provided with a separate Notification and Acknowledgement form to complete.

By signing below I certify that I have carefully read and understand this Disclosure and Authorization.

Applicant Signature: Bouldigham

Date: 10/01/2018

107

FORM#6

SOCIAL REFERENCES

Mariana Botollo-Lipham

You must list five (5) people whom you know well and who live in the United States. They should be a good friend, peer, colleague or college roommate, whose combined association with you covers as much as possible of the last 10 years. DO NOT list your spouse, former spouse, or other relatives. DO NOT list anyone who is listed elsewhere in this application.

Incomplete information will result in a delay of your application process.

1. Complete Name (Lust, Middle, First):	Home Address: 315 Windsor Dr.
Glenda Smart Years Acquainted and Relationship:	(City, State, Zip Code) Fayetteville, 64 30215
9 years I friend	Cell Phone (Including Area Code):
DOB of Approximate Age:	Alternate Phone (Including Area Code):
Occupation:	Work Phone (Including Area Code):
Executive Assistant	
2. Complete Name (Last, Middle, First):	Hama Address: 3370 Headowview Ln SW
Frank Devereux Years Acquainted and Relationship:	(City, State, Zip Code): Marietta, GA 3008
I	Gell Phone (Including Area Code):
Byents/friend DOB/or Approximate Age:	Alternate Phone (Including Area Code):
60	
Occupation: SUrveyor/Company owner	Work Phone (Including Area Code):
(
3. Complete Name (Last, Miladle, First):	Home Address: 205 Fairfield Circle
Miciam Awachie Years Acqueinted and Relationship:	(City, State, Zip Corde): Fayetterille, GA 30214
1 • •	Cell Phone (Including Area Code):
9 years/friend DOB of Approximate Age:	Alternate Phone (Including Area Code):
52	Mork Phone (Inchiding Area Code):
Pridate School English Teache	
4. Complete Name (Last, Middle, First):	Home Address: 1973 Canfield Glen
Sheilah Padayhag Yezrs Acquainted and Relationship:	(City, State, Zip Code): Lawrence vi We, G. A 30044
	Cell Phone (Including Area Code):
3 years / friend DOB or Approximate Age:	Alternate Phone (Including Area Cod
45	
Occupation: Practitioner	Work Phone (Including Area Code):
5. Complete Name (Last, Middle, First):	Home Address: 2618 Sherman Oaks Dr.
Tadesse Haileyesus	-
	(City, State, Zp Code): Smell wille, GA 30039
9 years/friend	Cell Phone (Including Area Code);
DOB of Approximate Age:	Alternate Phone (Including Area Co
99 Decupation: 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Work Phone (Including Area Code).
Hathematical Statician	<u> </u>