

## 2025 QUICK REFERENCE GUIDE

| Last Name                |  |
|--------------------------|--|
| First Name               |  |
| Middle Initial           |  |
| Date of Birth            |  |
| MPTC User-ID             |  |
| Employing Agency Name    |  |
|                          | Select from choices:   |
| Officer Type             | Full-time  |
|                          | Part-time  |
|                          | Details only   |
|                          | Select from choices:   |
|                          | Active   |
| Employment Status        | Out on Leave   |
|                          | <ul> <li>Suspended by Agency</li> </ul>                                      |
|                          | Inactive   |
|                          | Select from choices:   |
|                          | Active     Describer Duty  |
|                          | <ul> <li>Regular Duty</li> <li>Modified Duty/Admin Duty</li> </ul>           |
|                          | <ul> <li>Modified Duty/Admin Duty</li> <li>Details Only</li> </ul>           |
|                          | Out on Leave   |
|                          | <ul> <li>Administrative</li> </ul>   |
|                          | <ul> <li>Medical/Injured- on Duty</li> </ul>                                 |
|                          | <ul> <li>Chemotherapy/radiation</li> </ul>                                   |
|                          | <ul> <li>Military</li> </ul>   |
|                          | <ul> <li>Leave of Absence</li> </ul>   |
|                          | o FMLA   |
| Employment Sub-status    | <ul> <li>Parental leave</li> </ul>   |
|                          | <ul> <li>Workers' compensation</li> </ul>                                    |
|                          | Inactive   |
|                          | <ul> <li>Terminated for cause</li> </ul>                                     |
|                          | <ul> <li>Resigned in good standing</li> </ul>                                |
|                          | <ul> <li>Resigned in lieu of discipline/<br/>during investigation</li> </ul> |
|                          | during investigation   |
| Work Email Address       | <ul> <li>Retired in good standing</li> </ul>                                 |
| Personal Email Address   |  |
| Mailing Address          |  |
| Communication Preference | Calact from abairma  |
|                          | Select from choices:   |
|                          | Email  |
|                          | US Postal Mail service   |

## 2025 QUICK REFERENCE GUIDE

| RECERTIFICATION QUESTIONS   |                                     |
|---|-------------------------------------|
| Evaluator's Name  |                                     |
| Has the officer completed the annual in-service training for TY25?  | Yes/No                              |
| Does the officer possess current first aid and CPR certifications?  | Yes/No                              |
| Has the officer ever been convicted of a felony by any Federal or state<br>court? (Answer "Yes" to this question if the officer admitted to<br>sufficient facts, received a Continuance Without a Finding (CWOF) or<br>equivalent disposition, or was sentenced to a term of probation for any<br>felony offense, even if the matter was subsequently dismissed.) | Yes/No                              |
| Since the officer's last certification, has the agency submitted to the<br>Commission all reports regarding the officer that were required under<br>M.G.L. c. 6E, § 8 and 555 CMR 1.01? (this may require the agency to<br>first provide the Commission with any information that it was required<br>to report but neglected to provide previously.)              | Yes/No/Nothing<br>to Report         |
| Has the Agency Head/Designee/ Appointing Authority determined that the officer possesses good moral character and fitness for employment as a law enforcement officer?  | Yes/No/Not<br>Applicable -<br>Chief |
| If you answered "no" to the previous question, please provide a brief summary explaining your reason.   |                                     |
| <ol> <li>Please note the following:</li> <li>Upload into the portal the non-attestation form containing a more detailed report explaining your negative attestation or non-attestation</li> <li>Upload any supporting documentation</li> <li>Provide a copy of such report and documentation to the officer</li> </ol>  |                                     |