

#### NOTICE OF PUBLIC MEETING

Monday, April 18, 2022 City Council Chambers 680 Park Avenue Idaho Falls, ID 83402 3:30 p.m.

The public is invited to observe City Council Work Sessions. However, to observe appropriate social distancing guidelines, as recommended by the Centers for Disease Control and Prevention (CDC), seating in the Council Chambers may be limited. All seating is available on a first-come, first-serve basis. The public also may view this meeting via livestream on the City's website at <a href="https://www.idahofallsidaho.gov/429/Live-Stream">https://www.idahofallsidaho.gov/429/Live-Stream</a>. The agenda does not include an opportunity for public interaction.

This meeting may be cancelled or recessed to a later time in accordance with law. If you need communication aids or services or other physical accommodations to participate or access this meeting or program of the City of Idaho Falls, you may contact City Clerk Kathy Hampton at 612-8414 or the ADA Coordinator Lisa Farris at 612-8323 not less than 48 hours prior to the meeting. They can help accommodate special needs.

#### **CITY COUNCIL WORK SESSION**

Times listed in parentheses are only estimates.

Call to Order and Roll Call

Mayor and Council:

-Calendars, Announcements, Reports, and Updates (15)

-Liaison Reports and Councilmember Concerns (10)

Police Department:

-Discussion: Naming Conventions for Idaho Falls Policing

Facility (25)

Action Desired: Council Direction to Staff

-Discussion: Police Vehicle Replacements (45)

Action Desired: Council Direction to Staff

-License Appeal Hearing and Council Deliberation (25)

Action Desired: Affirm or reverse original decision (or take other

action deemed appropriate)

Community Development Services and

City Attorney:

-Training: Best Practices for Land Use Hearings as required by Idaho's Local Land Use Planning Act (LLUPA), Idaho Statutes,

Title 67, Chapter 65 (30)

DATED this 15th day of April 2022

Kathy Hampton, City Clerk

# Police - License Appeal Hearing

Bryce A. Johnson | Chief of Police Chief's Office (208) 612-8660 **Detective Division** (208) 612-8630 Animal Shelter (208) 612-8670 Records (208) 612-8600



# MEMORANDUM

TO:

City Clerk's Office

**FROM:** Captain Jeremy Galbreaith

**DATE:** March 15, 2022

RE:

Denial – Kayla Castillo – Smart Starts Childcare 2

Kayla Castillo applied for a Childcare Worker Certification for Smart Starts Childcare 2. After receiving the background check on 03/15/2022 it is the City of Idaho Falls Police Department's recommendation to deny the license. The background check showed that Kayla Castillo does not qualify under City Code 6-3-8 C. 8.:

6-3-8: LICENSES/CERTIFICATION, DENIAL, SUSPENSION OR REVOCATION: A license or certification applied for or issued under this Chapter shall be denied, suspended, or revoked:

C. Where Applicant; Licensee; Owner; Operator; Child Care Worker; Resident; Volunteer, On- Site Non-Provider; spouse or significant other of an Owner has been found guilty of, plead guilty to, or received a withheld judgment, or admitted to the elements of any of the following enumerated crimes, or any substantially similar provision of foreign criminal violation, notwithstanding the form of judgment(s) for any offense involving neglect, any physical injury to, or other abuse of a child, or any of the following offenses or a similar provision in another jurisdiction, for a period of five (5) years immediately preceding the date of application for license or renewal:

8. Petit Theft, Section 18-6409

DENIAL MEMO-103.2022 Kayla Castilloe CCWC



City License No.:

Entered: 39-7077

H & W Mailed: 3-9-2077

H & W Received: 3-15-207

Approved/Denied By and Date: ALBRATH 315200

# APPLICATION FOR CHILD CARE WORKER CERTIFICATION

Application Fee:	: \$20		Receipt No.: 2173
Fingerprint Fee:			
Consent to Rele	ase: \$20	,	
Applicant Name	——————————————————————————————————————	<u> </u>	Middle
	Last	FIRST	iviidalie
Date of	f Birth:	Social Security Number:	
Residence Addre	ess: <u>(070 N. Farns W</u>	Dorth DR. I-claho	Falls, ID 83401
Mailing Address (If Different from Ab	s:street	City	Zlp
•	ylabear 5136 @g	,	
Teleph	hone Number: <u>208 – 403 – 78</u>	Alternate Telephone Nur	mber:
Other Names ar	nd Nicknames Known By (Including Maid	en Name):	
All Addresses fo	or Immediate Past Five (5) Years (may co	ntinue on separate page): 3177	E. Chasewood Dr.
	San Franklin Whore Employed Six	oart Starte daild	care and preschou
Name of Child C	Late Facility Where Employed	MIT GIALLS CHILD	Tarr time press
	by certify that by my initials next to e	CLARATION STATEMENT each statement that the following ha	ns not occurred in Idaho or in
any of	ther State or U.S. Territory:		
<u> </u>	<ol> <li>Denial, revocation, or suspension of a Child Care Facility License, Child Care Worker License or other similar permit or license. If yes, explain when/circumstances:</li> </ol>		
+C	Outstanding warrants, receipt of a Withheld Judgment, or conviction or admission of the elements of any felony or misdemeanor crime. If yes, explain when/circumstances:		
<u> </u>	3. Admitted to, been convicted of, or had a Withheld Judgment for any crime committed against children, child pornography or any offense involving sexual misconduct, pandering or prostitution. If yes, explain when/circumstances:		
<u>FC</u>	4. Registered, failed to register, or required to register as a sex offender in the State of Idaho (as provided by Idaho Code Title 18, Chapter 83) or in any other State or U.S. Territory.		
<u>kc</u>	<ol><li>Diagnosed by a Licensed Couns pedophile or a danger to children.</li></ol>	elor, Psychologist, Psychiatrist, or co	urt appointed examiner as a
<u>kc</u>	involving the use of alcohol or the s	or had a Withheld Judgment of any fo ale, possession, or use of drugs, includ circumstances:	ing use or possession of drug

I hereby authorize the City of Idaho Falls, its Agents and Employees, to seek information and conduct an investigation related to the statements set forth in this application and any disqualifying event set out in Idaho Falls City Code Title 6, Chapter 3.

I hereby authorize any investigator, agent, or other duly appointed representative of the authorized Federal agency conducting my background investigation to receive any criminal history record information pertaining to me, which may be in the files of any Federal, State, or Local Criminal Justice Agency. I understand my fingerprint form may be provided to other Federal, State, or Local Agency in conjunction with the application process, and I consent to such disclosure.

#### THIS RECORD IS SUBJECT TO THE FOLLOWING USE AND DISSEMINATION RESTRICTIONS:

Under provisions set forth in Title 28, Code of Federal Regulations (CFR), Section 50.12, both governmental and non-governmental entities authorized to submit fingerprints and receive FBI Identification Records must notify the individuals fingerprinted that the fingerprints will be used to check the criminal history records of the FBI. Identification records obtained from the FBI may be used solely for the purpose requested and may not be disseminated outside the receiving department, related agency, or other authorized entity. If the information on the record is used to disqualify an applicant, the official making the determination of suitability for licensing or employment shall provide the applicant the opportunity to complete, or challenge the accuracy of, the information contained in the FBI Identification Record. The deciding official should not deny the license or employment based on the information in the record until the applicant has been afforded a reasonable time to correct or complete the information, or has declined to do so. An individual should be presumed not guilty of any charge/arrest for which there is no final disposition stated on the record or otherwise determined. If the applicant wishes to correct the record as it appears on the FBI's CJIS Division Records System, the applicant should be advised that the procedures to change, correct or update the record are set forth in Title 28, CFR, Section 16.34.

#### PRIVACY ACT STATEMENT:

The Privacy Act of 1974, 5 U.S.C. § 552a, Public Law No. 93-579, (Dec. 31, 1974) establishes a Code of Fair Information Practice that governs the collection, maintenance, use, and dissemination of personally identifiable information about individuals that is maintained in systems of records by federal agencies. A system of records is a group of records under the control of an agency from which information is retrieved by the name of the individual or by some identifier assigned to the individual. The Privacy Act requires that agencies give the public notice of their systems of records by publication in the Federal Register. The Privacy Act prohibits the disclosure of information from a system of records absent the written consent of the subject individual, unless the disclosure is pursuant to one of twelve statutory exceptions. The Act also provides individuals with a means by which to seek access to and amendment of their records, and sets forth various agency record-keeping requirements.

### STATEMENT OF OATH

DIAIEM	,
I swear or affirm that the statements contained in this applica	ation for a Child Care Worker Certification are true and correct.
Kayle Castillo	3-9-22
Signature of Applicant	Date
STATE OF IDAHO ) : ss. County of Bonneville )	
Λ	in the year 2022, before me the undersigned, a Notary Public, known or Identified to me to be the person whose it to me that he/she executed the same.
PUBLIC SEAL)	Notary Public for the State of Idaho Residing at DAHO FALLS, Idaho My Commission Expires: 0103-7874



## **CITY OF IDAHO FALLS**

City Clerk's Office

City Clerk's Office: (208) 612-8415

FAX: (208) 612-8560

## APPLICATION TO APPEAL A DECISION TO THE CITY COUNCIL

Appellant information:	
Contact Name: Kayla Castillo	Phone Number: 268 - 463 - 7880
Address: 670 N. Farnsworth DR.	Email: Kaylabear 5136 agmai
City: Idano Falls State:	ID Zip: 83401
Reason for Appeal:	· ·
100	Child Care Worker
1	oning was because
	my record.
The perty that on my vec	ord does not affect
my ability to work with	Children and Would
like the opportunity to	discuss that.
City of Idaho Falls Code of Ordinances:	
4-1-2: (C) Any applicant may appeal a denial of his or her application within ten (10) days after the date the denial is delivered to the	
form as may be approved by the City Clerk and shall in summary	form set forth the reasons for the appeal. Such
notice of appeal shall be accompanied by a filing fee in the amoun non-refundable. Upon timely delivery of a notice of appeal and	

schedule a hearing before the City Council within thirty (30) days after the delivery of the notice of appeal. The City Clerk shall also deliver a written notice of hearing to the applicant not less than seven (7) days prior to the date of such hearing. A copy of the notice of hearing shall likewise be sent to the Chief of Police. At the hearing, the City Clerk shall keep a transcribeable, verbatim record of the hearing, including any exhibits or documentary evidence and shall retain such transcript for a period of not less than six (6) months following the conclusion of the hearing. At the conclusion of the hearing, the City Council shall render a decision, which may be verbal or in writing. Such decision shall succinctly state the reasons for the denial or affirmation of the decision of the City Clerk.

Date: 3-21-22

<u>Kayla Cestilo</u> Signature of Appellant

\$50.00 Filing Fee for Appeal Receipt Number