

STEUBEN COUNTY SHERIFF'S OFFICE



TELECOMMUNICATIONS OFFICER/E911 DISPATCHER APPLICATION

APPLICANT NAME

DATE SUBMITTED

Return in a sealed envelope or in person to:

STEUBEN COUNTY SHERIFF'S OFFICE
206 E GALE ST
ANGOLA, IN 46703

The Steuben County Sheriff's Office is an Equal Opportunity Employer

The following is a summary of the minimum applicant standards and criteria which must be met by an applicant to be considered in the selection process. Also, a brief description of the selection process is listed and applicants will be notified in writing when the selection process begins and the testing schedule.

MINIMUM APPLICANT STANDARDS AND CRITERIA

- Must be a citizen of the United States of America.
- Applicant must be at least eighteen (18) years of age at the time of appointment as a Telecommunications Officer/E911 Dispatcher.
- Must be a high school graduate and produce evidence of same by way of a diploma or equivalency diploma issued by an accredited school.
- Must possess a valid motor vehicle driver's license. **A copy of the applicant's driver's license must be submitted with this application.**
- Must possess, as a minimum, visual acuity that is correctable to 20/40 in both eyes.
- Must possess, as a minimum, auditory acuity that is within normal range in both ears.
- Must be of such physical state so as to sustain the rigors and demands of Telecommunications/E911 dispatcher work.
- Must be of such mental state so as to sustain the rigors and demands of Telecommunications/E911 dispatcher work.
- "Mental state" means having the ability to exercise good judgment; having balance temperament; being free of debilitating psychological disorders and being of such psychological health to adequately complete psychological testing.
- **You shall not have any visible tattoo or group of tattoos that is readily identifiable as racist, sexist profane, or demeaning. No visible tattoos shall be about the foot, hand, face, head, neck, or throat areas above the collar bone. One ring on one finger of each hand not larger than 3/8" wide is permitted. Any visible tattoo determined to reflect poorly on the public image of the Sheriff's Office as determined by the Sheriff or Chief Deputy is also prohibited.**
- Must be a person of excellent character having favorable references from previous employers, credit history, and personal references. Excellent character includes an absence of pattern or practice of substance abuse or criminal misdemeanor convictions and **no felony convictions**.
- Have a good work history with recommendations from previous employers.
- Must agree to take a polygraph or voice stress test
- If discharged from the military service, must possess an Honorable Discharge.
- Must submit to and pass a pre-employment drug screen.

SELECTION PROCESS

There are four steps to the initial application process. Each applicant must successfully pass each step before moving on to the next step.

- Step 1: Submit a completed Telecommunications Officer/E911 Dispatcher application to the Steuben County Sheriff's Office.
- Step 2: Written examination & interview process.
- Step 3: Background investigation (criminal/driving history, employment history, reference check and character verification).
- Step 4: Conditional offer of employment, pre-employment drug screen.

NOTICE

Applications will not be considered unless each of the following conditions is met:

Each application must be complete in every respect.

Any misrepresentation of facts will disqualify the applicant.

- This form must be filled out in **black ink** in the **handwriting of the applicant**.
- Answer all questions. If the question does not apply, state: "None" or "Does Not Apply".
- Any further information you wish to add may be placed on separate pages with proper identifying reference marks.
- It is important that you clearly and correctly indicate your mailing address. In the event you change your address after filing application, mail notification of new address immediately.

TELECOMMUNICATIONS OFFICER/E911 DISPATCHER APPLICATION

NAME: _____

Last
First
Middle

RESIDENCE: _____

Street or Rural Address
Apt No

City
County
State
Zip Code

MAILING ADDRESS (if different from residence): _____

City
County
State
Zip Code

TELEPHONE: _____

Cell #
Alternate #

EMAIL: _____

INITIAL REQUIREMENT DATA

ARE YOU A US CITIZEN? _____

PHYSICAL STATUS

ARE YOU, TO THE BEST OF YOUR KNOWLEDGE, ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE POSITION OF TELECOMMUNICATIONS OFFICER/E911 DISPATCHER? _____

IF NO, EXPLAIN FULLY ON A SEPARATE SHEET.

EDUCATION DATA

LIST INFORMATION FOR HIGH SCHOOL AND ALL ACCREDITED COLLEGES/UNIVERSITIES YOU HAVE ATTENDED:

NAME OF SCHOOL	COURSE OF STUDY	# HOURS COMPLETED	GPA ON 4.0 SCALE	DID YOU GRADUATE	DEGREE

EMPLOYMENT DATA

LIST CHRONOLOGICALLY (MOST RECENT EMPLOYMENT FIRST) ALL PAST AND CURRENT EMPLOYMENT INCLUDING PART TIME (USE ADDITIONAL SHEETS IF NECESSARY).
EXPLAIN ANY BREAKS IN EMPLOYMENT.

DATES OF EMPLOYMENT FROM - TO	NAME OF EMPLOYER	ADDRESS AND PHONE NUMBER OF EMPLOYER	POSITION HELD	ANNUAL SALARY	REASON FOR LEAVING

HAVE YOU BEEN DISCHARGED OR RESIGNED TO PREVENT BEING DISCHARGED FROM A POSITION OF EMPLOYMENT? _____
IF YES, EXPLAIN FULLY ON A SEPARATE SHEET.

REFERENCES

PLEASE DO NOT LIST RELATIVES AS REFERENCES. INFORMATION MUST BE COMPLETE.

NAME	PHONE #	STREET	CITY / STATE

MILITARY HISTORY AND STATUS

HAVE YOU EVER SERVED IN THE MILITARY ON ACTIVE DUTY (INCLUDE INITIAL ACTIVE DUTY TRAINING WITH THE NATIONAL GUARD AND RESERVES)? _____

MILITARY BRANCH	HIGHEST RANK	RANK AT SEPARATION	TYPE OF DISCHARGE / REENLISTMENT CODE

ARE YOU ELIGIBLE TO RE-ENLIST? _____
IF NO, EXPLAIN FULLY ON A SEPARATE SHEET.

MILITARY CITATIONS OR OTHER AWARDS RECEIVED: _____

WERE YOU EVER DISCIPLINED (COURT MARTIAL, ARTICLE 15, CAPTAIN'S MAST, ETC.) WHILE ON DUTY? _____

IF YES, EXPLAIN FULLY ON A SEPARATE SHEET.

LAW ENFORCEMENT/DISPATCH EXPERIENCE

HAVE YOU EVER BEEN EMPLOYED BY A LAW ENFORCEMENT AGENCY OR DISPATCH CENTER? _____

LIST BELOW WHERE YOU HAVE BEEN EMPLOYED AS A CONFINEMENT/CORRECTIONAL OFFICER

LAW ENFORCEMENT AGENCY / ADDRESS	DATE FROM / TO	RANK	REASON FOR LEAVING

ARE YOU ELIGIBLE FOR RE-HIRING? _____

IF NO, EXPLAIN FULLY ON A SEPARATE SHEET

LIST ANY SPECIALTY TRAINING YOU HAVE RECEIVED: _____

WERE YOU EVER DISCIPLINED? _____

IF YES, EXPLAIN FULLY ON A SEPARATE SHEET

VEHICLE CRASH AND ARREST RECORD

DO YOU CURRENTLY POSSESS A VALID AUTOMOBILE DRIVING LICENSE? _____

LICENSE NUMBER: _____ STATE: _____ EXPIRATION DATE: _____

HAS YOUR DRIVER'S LICENSE EVER BEEN SUSPENDED? _____

IF YES, EXPLAIN: _____

LIST VEHICLE CRASHES IN WHICH YOU HAVE BEEN INVOLVED AS A DRIVER

LAW ENFORCEMENT AGENCY INVOLVED	DATE FROM / TO	LOCATION/DESCRIPTION

HAVE YOU EVER RECEIVED A TICKET OR BEEN ARRESTED FOR A TRAFFIC OFFENSE? _____

IF YES, DESCRIBE BELOW:

DATE	LOCATION	CHARGE	FINE OR SENTENCE

HAVE YOU EVER BEEN ARRESTED FOR A CRIMINAL OFFENSE? _____

IF YES, DESCRIBE BELOW:

DATE	LOCATION	CHARGE	FINE OR SENTENCE

HAVE YOU EVER BEEN CONVICTED OF A FELONY? _____

IF YES, EXPLAIN FULLY ON A SEPARATE SHEET.

HAVE YOU EVER BEEN OR ARE YOU CURRENTLY INVOLVED AS A PLAINTIFF, DEFENDANT, PETITIONER,

OR RESPONDENT IN ANY CIVIL COURT ACTION: _____

IF YES, EXPLAIN FULLY ON A SEPARATE SHEET.

CERTIFICATION

I CERTIFY THAT:

- ALL REQUIRED ITEMS ARE INCLUDED WITH THIS APPLICATION
 - MILITARY
 - DD214 (IF VETERAN)
 - DD217 (IF ACTIVE DUTY)
 - PREVIOUS LAW ENFORCEMENT /DISPATCHER DOCUMENTATION
 - COPY OF SPECIALIZED TRAINING AND AWARDS
 - COPY OF COMMENDATIONS AND AWARDS

- I HAVE PERSONALLY COMPLETED THIS APPLICATION.

I SWEAR OR AFFIRM UNDER PENALTY OF PERJURY THAT ALL INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: _____

DATE: _____



STEUBEN COUNTY
SHERIFF'S OFFICE

Rodney L. Robinson, Sheriff
206 EAST GALE STREET • ANGOLA, INDIANA 46703
(260) 668-1000 ext 5000 • Fax (260) 665-9476

www.steubensheriff.com

RELEASE FORMS

I, _____ do hereby give my consent and authorize the Steuben County Sheriff's Office to check criminal records, driver's license, and credit history.

I, _____ give the Steuben County Sheriff's Office permission to obtain bodily fluids and for a drug test to be done.

I, _____ do hereby give my consent and permission for the Steuben County Sheriff's Office to obtain previous employment information.

Witness

Signature

Printed Name

Date

Attends regular staff meetings; periodically attending prescribed training programs for certification in specialized law enforcement areas.

Shall be assigned to specialty projects as assigned per director.

Assist with training new hires on dispatch protocols and procedures.

Cleans office areas as required.

Periodically makes public speaking presentations regarding Division operations to community groups as assigned.

Performs related duties as assigned.

I. JOB REQUIREMENTS AND DIFFICULTY OF WORK:

A high school diploma or GED. Ability to acquire/maintain required certification, including IDACS/NCIC computer systems, CPR and Emergency Medical Dispatch.

Thorough knowledge of and ability to make practical application of the customary practices, procedures, rules and regulations of the Department, and personnel policies of the organization.

Practical knowledge of area law enforcement, EMS and fire demands, and ability to physically perform the essential duties of the position, including operating a computer for long periods and sitting for long periods with little or no opportunity for breaks during shift.

Working knowledge of and ability to read maps, use emergency code terminology and clearly and calmly respond during stressful situations.

Working knowledge of Standard English grammar, spelling and punctuation and ability to appropriately receive, maintain, and log all radio traffic information.

Ability to meet all Department hiring and retention requirements, including incumbent not posing a direct threat to the health and safety of other individuals in the work place.

Ability to effectively listen, comprehend, communicate orally and in writing with co-workers, other County departments, the public, other officials, and agencies during varied emergency situations, including being sensitive to professional ethics, gender, cultural diversities and disabilities.

Ability to provide public access to or maintain confidentiality of department information and records according to State requirements.

Ability to comply with all employer and department policies and work rules, including, but not limited to, attendance, safety, drug-free workplace and personal conduct.

Ability to successfully and professionally obtain proper information and take control of hysterical, hostile, and misinformed individuals in emergency situations.

Ability to effectively receive and dispatch calls requiring emergency and informational assistance and take authoritative action as situations demand. Ability to condense large amounts of information into coherent typed remarks, and to use and understand a variety of acronyms and codes.

Ability to type with speed and accuracy and properly use all equipment, including radio console, IDACS and

Department computers, typewriter, fax machine, Enhanced 911 system, intercom phone and Telecommunications Device for the Deaf (TDD).

Ability to work alone with minimum supervision and with others in a team environment.

Ability to work on several tasks at the same time and work rapidly for long periods, often under time pressure.

Ability to understand, memorize, retain, and carry out written and oral instructions, and present findings in oral or written form.

Ability to occasionally plan and present public speaking presentations.

Ability to work irregular and/or extended hours as directed or required and potential shift coverage as directed or required.

II. RESPONSIBILITY:

Incumbent performs a wide variety of communication duties according to a flexible, customary routine with work priorities determined by service needs of the public. Incumbent makes independent decisions and takes authoritative action in response to situational demands, with work primarily reviewed in progress for compliance with Department policies and procedures and soundness of judgement. Errors in decision or work are usually prevented through procedural safeguards and are detected through supervisory review, with undetected errors possibly resulting in endangerment or loss of life to Department personnel and/or others.

III. PERSONAL WORK RELATIONSHIPS:

Incumbent maintains frequent contact with co-workers, other County departments, the public, other officials, and agencies for purposes of receiving and responding to emergency/non-emergency calls and dispatching personnel. Incumbent regularly engages in non-routine contact with callers requesting emergency assistance in situations that may jeopardize public safety.

Incumbent reports directly to Shift Supervisor/Assistant Director.

IV. PHYSICAL EFFORT AND WORK ENVIRONMENT:

Incumbent performs duties in a standard office environment and is frequently exposed to stressful situations associated with emergency requests for assistance, involving a restricted seated position for long periods with little or no opportunity for breaks during shift, keyboarding, lifting/carrying objects weighing less than 25 pounds, close vision, speaking clearly, and hearing sounds/communication. Incumbent works irregular and/or extended hours as directed or required.

APPLICANT/EMPLOYEE ACKNOWLEDGEMENT

The job description for the position of Telecommunications Technician in the E-911 Communications Department describes the duties and responsibilities for employment in this position. I acknowledge that I have received this job description, and understand that it is not a contract of employment. I am responsible for reading this job description and complying with all job duties, requirements and responsibilities contained herein, and any subsequent revisions.

Is there anything that would keep you from meeting the job duties and requirements as outlined?
Yes _____ No _____

Applicant/Employee Signature

Date

Print or type name