

St. Francois County 911



Employment Application Packet

Revised 2015
St. Francois County 911

911 Dispatcher Job Description

Uses a computer-aided dispatch system, receive emergency calls from the public requesting police, fire, medical or other emergency services. Determine the nature and location of the emergency; determine priorities, and dispatch police, fire ambulance or other emergency units as necessary and in accordance with established procedures. Receive and process 911 emergency calls, maintain contact with all units on assignment, maintain status and location of police and fire units. Monitor direct emergency alarms, answer non-emergency calls for assistance. Enter, update and retrieve information from a variety of computer systems. Receive requests for information regarding vehicle registration, driving records and warrants, and provides pertinent data. Monitor several complex public safety radio frequencies. Operate a variety of communications equipment, including radio consoles, telephones and computer systems.

- ☐ I am applying for full time employment
- ☐ I am applying for part – time employment
- ☐ I wish to be placed on a hiring list for one year
- ☐ I agree to participate in testing for the position for which I am applying

St. Francois County 911

Consent for Personal Background Check

I, _____ as a candidate for employment for St. Francois Co 911 willfully consent, by my signature below, to conduct a check of my personal background by St. Francois County 911 I understand this is conducted under the authority of St. Francois County 911. Further, I understand that personal information obtained during the background check progress is confidential, will be made known only to St. Francois and will be provided to its designees on a need basis to determine if employment is warranted.

Signature: _____

SSN: _____

Date of Birth: _____

Date: _____

**PRE-EMPLOYMENT DRUG/ALCOHOL TESTING
CONSENT AND RELEASE FORM**

I hereby consent to submit to a drug or alcohol test and to furnish a sample of one or more of the following test of my urine, breath, hair follicle, and/or blood for analysis, as shall be determined by St.Francois County Joint Communications Center in order to meet with their policy regarding the selection of applicants for employment.

I further authorize and give full permission to have the St.Francois County Joint Communication Center and/or its authorized agents and physicians to send the specimen or specimens so collected to a laboratory for a screening test for the presence of any prohibited substances under the policy, and for the laboratory or other testing facility to release any and all documentation relating to such test to St.Francois County Joint Communications Center. I further agree to and hereby authorize the release of the results of said tests to the St.Francois County Joint Communications Center.

I understand that it is the current use of illegal drugs that would prohibit me from being employed at St.Francois County Joint Communications Center.

I further agree to hold harmless the St.Francois County Joint Communications Center and its agents and physicians from any liability arising in whole or part, out of the collection of specimens, testing, and use of the information from said testing in connection with St.Francois County Joint Communications Centers consideration of my application of employment.

I further agree that a reproduced copy of this pre-employment consent and release form shall have the same force and effect as the original.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

APPLICANT:

Print Name: _____ S.S.#: _____

Signature: _____ Date: _____

WITNESS:

Print Name: _____

Signature: _____

St. Francois County 911

102 Industrial Drive

Park Hills Mo

573-431-7842

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age, physical or mental disability.

Name _____ Date of application _____
LAST FIRST MIDDLE

Address _____ City _____ State _____ Zip _____

Telephone _____

1. GENERAL INFORMATION:

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation? ☐ Yes ☐ No

Have you been convicted of any felonies other than minor traffic violations during the past seven years? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying.) ☐ No ☐ Yes If yes, explain: _____

2. EDUCATION & TRAINING:

Circle last grade completed - Grade 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 Masters _____ Doctorate _____

Name & Address of School

| Name & Address of School | Major Course studied | Graduated or degree (Yor N) | Average Grade |
|---|----------------------|-----------------------------|---------------|
| Last High School Attended/Address: | | | |
| College or University/Address | | | |
| College or University/Address Other School (Technical, Vocational, Graduate, etc.) /Address | | | |

List any scholarships, academic honors, awards or special achievements: _____

3. SKILLS Please list any skills you have that are appropriate for the position you are applying for: _____

If required, will you work?

Rotating shifts ☐ YES ☐ NO
Overtime ☐ YES ☐ NO

Saturdays ☐ YES ☐ NO
Sundays ☐ YES ☐ NO

Position applying for, be specific: _____

Salary Requirements
\$ _____

☐ per hour
☐ per month

State fully why you believe you are qualified for this position

Date you can start

INTERESTS / ACCOMPLISHMENTS: You may wish to list significant experience, interests & accomplishments gained while working as a volunteer or as a hobbyist that may be useful in the position (s) you are seeking. Names or organizations designating religion, race, etc. need not be mentioned.

EMPLOYMENT HISTORY

Starting with your PRESENT or MOST RECENT EMPLOYER list in consecutive order ALL EMPLOYMENT for at least the past **FOUR** employers. If currently employed, may we contact your employer? ☐ Yes ☐ No

PRESENT OR MOST RECENT EMPLOYER

| | | | | | | | |
|---|--|------------------------|-----------|------------------------|------------------------------------|------------------------|------------------------------------|
| FULL NAME OF COMPANY | | | | (AREA CODE) | TELEPHONE | SALARY BEGIN END | EMPLOYED FROM TO MO/YR MO/YR |
| STREET ADDRESS | | CITY | STATE | ZIP | | | |
| NAME & TITLE OF SUPERVISOR | | TITLE OF YOUR POSITION | | | | REASON FOR LEAVING: | |
| LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: | | | | | | | |
| | | | | | | | |
| FULL NAME OF COMPANY | | (AREA CODE) | TELEPHONE | SALARY BEGIN END | EMPLOYED FROM TO MO/YR MO/YR | | |
| STREET ADDRESS | | CITY | STATE | | | ZIP | |
| NAME & TITLE OF SUPERVISOR | | TITLE OF YOUR POSITION | | | | REASON FOR LEAVING: | |
| LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: | | | | | | | |
| | | | | | | | |
| FULL NAME OF COMPANY | | (AREA CODE) | TELEPHONE | SALARY BEGIN END | EMPLOYED FROM TO MO/YR MO/YR | | |
| STREET ADDRESS | | CITY | STATE | | | ZIP | |
| NAME & TITLE OF SUPERVISOR | | TITLE OF YOUR POSITION | | | | REASON FOR LEAVING: | |
| LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: | | | | | | | |
| | | | | | | | |
| FULL NAME OF COMPANY | | (AREA CODE) | TELEPHONE | SALARY BEGIN END | EMPLOYED FROM TO MO/YR MO/YR | | |
| STREET ADDRESS | | CITY | STATE | | | ZIP | |
| NAME & TITLE OF SUPERVISOR | | TITLE OF YOUR POSITION | | | | REASON FOR LEAVING: | |
| LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: | | | | | | | |
| | | | | | | | |

READ CAREFULLY: I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information may result in denial of employment or discharge. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

Signature _____ Date _____

Reference Sheet

1.

First Name: _____

Last Name: _____

Title: _____

Address: _____

Phone #: _____

Relationship: _____

Years known: _____

2.

First Name: _____

Last Name: _____

Title : _____

Address: _____

Phone #: _____

Relationship: _____

Years known: _____

3.

First Name: _____

Last Name: _____

Title: _____

Address: _____

Phone # : _____

Relationship: _____

Years known: _____