

TO APPLY:

SUBMIT FILLED OUT APPLICATION TO BRITTONI NELSON AT THE
LAW ENFORCEMENT CENTER: 702 1st ave S Fort Dodge, IA

Applications will be accepted until position is filled

Resume Encouraged, but not required

Signed waiver for criminal history/background checked must be
completed

Please call Brittoni (515) 573-2323 if you have any questions

WEBSTER COUNTY DISPATCH

Employment Application

APPLICANT INFORMATION

Last Name	First	M.I.	Date
Street Address			Apartment/Unit #
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.	Desired Salary	
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION

High School	Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
College	Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
Other	Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree

REFERENCES

Please list three professional references.

Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT

Company _____ Phone () _____
Address _____ Supervisor _____
Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____
Responsibilities _____

From To Reason for Leaving
May we contact your previous supervisor for a reference? YES NO

Company _____ Phone () _____
Address _____ Supervisor _____
Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____
Responsibilities _____

From To Reason for Leaving
May we contact your previous supervisor for a reference? YES NO

Company _____ Phone () _____
Address _____ Supervisor _____
Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____
Responsibilities _____

From To Reason for Leaving
May we contact your previous supervisor for a reference? YES NO

MILITARY SERVICE

Branch _____ From To
Rank at Discharge _____ Type of Discharge _____
If other than honorable, explain _____

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I understand that I will be required to pass a drug and alcohol screen and criminal history background check prior to my employment.

Signature _____ Date _____

Fort Dodge Police Department
702 1st Avenue South
Fort Dodge, Iowa 50501
(515)573-1426

AUTHORITY FOR RELEASE OF INFORMATION

Last Name	First Name	Middle Name	Date of Birth	SSN:

I, _____, do hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of the Fort Dodge Police Department, whether the records are of public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; financial or credit institutions, including records of deposit, withdrawals and balances of checking and savings accounts, and loans, and also the records of commercial or retail credit agencies (including credit reports and/or ratings); public utility companies; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me, and salary records; real and personal property tax statements and records, and other financial statements and records wherever filed; records of complaint, arrest, trial and/or convictions for alleged or actual violations of the law, including criminal, civil and/or traffic records; the result of any polygraph examinations; records of complaint of a civil nature made by or against me, wheresoever located.

I reiterate, and emphasize that the intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation which may provide pertinent data for the Fort Dodge Police Department to consider in determining my suitability for employment by that department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be, and the sources of information specifically identified herein.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the Fort Dodge Police Department. I understand that all materials pertaining to this background investigation become the property of the Fort Dodge Police Department and will not be returned to me.

I further understand that in the event my application is disapproved, the sources of confidential information cannot be revealed to me.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

MUST BE SIGNED IN THE PRESENCE OF A NOTARY

Signature

Street address

City, State and Zip

Subscribed and sworn before me this
 _____ day of _____ 20____.

My commission expires _____ 20____

Notary: _____

Emergency Telecommunication Dispatcher

Description of Work

Effective Date:

General Duty Statement

Under general direction of the Emergency Telecommunication Dispatch Supervisor, the employee operates a 911 emergency computerized radio dispatch and telephone system maintaining contact with city, county and other emergency and public safety related personnel in the field while relaying information and data in the provision of public safety services to the community following prescribed standards of operation. Work schedules are determined around a 24hour/365 day operational schedule primarily in an office environment. This position is often the first contact with citizens under highly stressful and emotional conditions requiring a sense of calm and competency from the employee.

Supervision Received

Work is performed under the supervision and direction of the Emergency Telecommunication Dispatch Supervisor.

Supervision Exercised

None.

Competencies

- Demonstrates an ability to interact effectively and in a professional manner with external and internal customers under sometimes highly stressful conditions where immediate action and response is required.
- Demonstrates the ability to manage multiple components in coordination with the various public safety disciplines while maintaining focus on individual goals that culminate in the overreaching common goal of public safety.
- Demonstrates the ability to accurately enter information for disbursement to emergency and safety personnel with a minimum entry speed of 40 words per minute.
- Demonstrates the ability to become NCIC certified and maintain appropriate certification meeting all standards as required with certification.
- Demonstrates an ability to maintain a highly organized workplace maintaining manual and automated logs and records of activities as determined by standard operating procedures for the telecommunications center.
- Demonstrates an understanding of the principles and an application of the principles of Character Counts® as adopted by the Webster County Telecommunications Board.
- Demonstrates a working ability to operate the necessary computer programs to create, develop, and maintain complex spreadsheets and database tools.

- Demonstrates an ability to self start on projects, follow through with ongoing matters and see that various assignments are brought to full completion within a specified timeframe.
- Demonstrates an understanding of ethical business practices and the need to maintain confidentiality at all times both on the job and away from the job regarding activities that occurred and calls received.
- Demonstrates an ability to remain flexible in meeting customer demands and makes sound judgments and demonstrates strong decision making abilities as to the priority of calls, assignments and the overall performance of duties.
- Demonstrates a working knowledge of workplace policies and procedures as they relate to the assignments of this classification.
- Demonstrated knowledge of the geographic area within which calls are received to provide efficient and proper response to emergency calls for service.
- Demonstrated knowledge of NCIC regulations, local ordinances and Iowa law.

Requirements

Graduation from high school or having obtained a GED with a minimum of one year of experience working in a customer service oriented environment.

Operational conditions

Individuals must be able to operate phones, computers and associated office equipment with vision, speech and hearing that enables them to see details at both close and distance ranges, identify and understand speech of another person, listen to and understand information both verbally and in written form. This is often conducted under highly stressful conditions where numerous distractions may be present.

Certifications

NCIC/IOWA System within 6 months of employment.

Iowa Law Enforcement Academy Telecommunicator Basic 40 hour course within one year of employment.