



**HILLSDALE COUNTY
CENTRAL DISPATCH**
APPLICATION for EMPLOYMENT

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS To the Applicant: We appreciate your interest in Hillsdale County Central Dispatch (HCCD) and assure you that we are interested in your qualifications. A clear understanding of your background and work history will aid us in the application process. Your application **must be filled out completely** with no blanks for proper processing. A completed application **shall** be accompanied with a proper resume and cover letter attached.

We are an equal opportunity employer and shall consider qualified applicants for all positions without regard to race, color, sex, religion, national origin, age, height, weight, familial, marital or veteran status, or handicap. Incomplete applications may not be considered.

Date of Application: _____

APPLICATION MUST BE TYPED OR NEATLY PRINTED

PERSONAL

Name _____
(Last) (First) (Middle)

Address _____
(Numbers and Street) (City) (Zip Code)

Home Telephone Number _____ Day Time Phone Number _____
(Between 8 am-4 pm, Monday-Friday)

Email Address: _____ Are you 18 years of age or older? Yes No

Social Security Number (Last four digits): _____ Are you authorized to work in the United States? Yes No

Have you been previously employed by Hillsdale County or any of the Jurisdictions that HCCD serves? Yes No
If so, what agency and dates(s): _____

What positions have you worked? _____

Supervisor's Name: _____

Have you filed an application with Hillsdale County or HCCD before? Yes No

If yes, what are the dates(s): _____

List any relatives or friends working for HCCD or any of the Jurisdictions that HCCD dispatches for here: _____

In order to check and verify your work record, have you ever been known by another name? Yes No

If so, please provide name and explanation. _____

EMPLOYMENT

Position(s) applied for: _____

Salary Desired: _____ Date Available to Work: _____

How did you hear about this position? _____

MILITARY SERVICE RECORD

Have you had any experience in the Armed Forces of the United States or in a State National Guard? Yes No

If yes, what branch? _____ Rank at discharge: _____ Date of Discharge: _____

Did you receive an Honorable Discharge? _____

Are you in the Reserves? Yes No If yes, date obligation ends _____

Special/Technical Training: _____

EMPLOYMENT EXPERIENCE (List current or most recent job first- past 10 years minimum). Use additional paper if necessary.)

1	Employer:	Address:	Phone Number:
	Job Title:	Supervisor:	Work Performed /Duties:
	Employment Dates: From: To:	Hourly Rate/Salary: Beginning: Ending:	Reason for Leaving:
2	Employer:	Address:	Phone Number:
	Job Title:	Supervisor:	Work Performed /Duties:
	Employment Dates: From: To:	Hourly Rate/Salary: Beginning: Ending:	Reason for Leaving:
3	Employer:	Address:	Phone Number:
	Job Title:	Supervisor:	Work Performed /Duties:
	Employment Dates: From: To:	Hourly Rate/Salary: Beginning: Ending:	Reason for Leaving:

OTHER DISPATCH, LAW OR FIRE AGENCIES to which you have applied.

<i>Name of Agency</i>	<i>Location</i>	<i>Year Applied</i>	<i>Present Hiring Status</i>

EDUCATION

<i>Type</i>	<i>Name/ Location(Address, City, State)</i>	<i>Years Completed</i>	<i>Diploma/ Degree</i>	<i>Course of Study</i>
<i>Elementary</i>				
<i>Middle/Junior High School</i>				
<i>High School</i>				
<i>College</i>				
<i>Graduate</i>				
<i>Vocational School</i>				
<i>Other (Specify)</i>				
<i>Other (Specify)</i>				
<i>Other (Specify)</i>				

REFERENCES

Do not include relatives or former employers. Include at least two (2) peer references.

	<i>Name</i>	<i>Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>	<i>Telephone Number</i>	<i>Years Known</i>
1							
2							
3							
4							

ADDITIONAL INFORMATION

Have you been convicted of a crime? Yes No If so, where, when and nature of offense:

Do you have any criminal charges pending against you? Yes No If so, where, when and nature of offense:

Have you used any illegal substances within the last six months? Yes No
If Yes, please list the type and circumstance. (Answering "Yes" to this question is not an automatic disqualifier for a job with this agency)

Do you have a valid driver's license? Yes No License Number: State:

List the social media sites you belong to:

State any additional information or certifications that you feel may be helpful to us in considering your application:

AUTHORIZATION TO RELEASE INFORMATION

We appreciate your interest in employment opportunities with Hillsdale County Central Dispatcher. As part of our normal procedure during the pre-employment process, we may perform a routine inquiry into your background based on the information you have provided us. In order for such information to be released, we need your concurrence. Therefore, please read the following statement *carefully* and indicate your agreement by signing below.

TO WHOM IT MAY CONCERN:

I hereby authorize the Hillsdale County Central Dispatch (the “Employer”), or other authorized representative of the Employer, within one (1) year from the date hereof, to obtain any information in your files pertaining to my employment, military record, credit record, law enforcement record, medical or educational records, including, but not limited to, academic, achievement, attendance, criminal, personal history and disciplinary records. I hereby direct you to release such information upon request of the Employer or its authorized representative. I hereby release the Employer and any authorized representative, as custodian of such records, and any school, college, university, or other educational institution; hospital, or other repository of medical records; credit bureau; law enforcement agency; lending institution; consumer reporting agency; or other business establishment, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages whatsoever, which may at any time result to me, my heirs, family or associates because of the Employer’s request for and/or review of records described in this Authorization to Release Information. Should there be any questions as to the validity of this Release, you may contact me as indicated below.

Date: _____

Full Name – Signature

Full Name – Typed

Current Address – Typed

Drivers License Number & State

Social Security Number

(Area) Telephone Number

APPLICANT'S CERTIFICATION AND AGREEMENT
(Please Read Carefully)

1. Certification of Truthfulness

I certify that all statements on this application for Employment are made completely, truthfully and without evasion and further understand and agree that such statements may be investigated and if found to be false will be sufficient reason for not being employed, or if employed may result in my dismissal.

2. Job Understanding

I certify that I have been furnished and have read a General Description of the duties of an Emergency Telecommunicator and a Self-Screening form. I understand the unusual nature of the job for which I am applying.

3. Authorization for Information

I authorize the references I have listed above, any prior or current employer of mine, any educational institutions and any person or organization, to give you any and all information concerning my previous employment or educational accomplishments, including any disciplinary information, and any pertinent information they may have, personal or otherwise, including statements of character and background and release all parties from all liability for any damage that may result from furnishing information to you. In addition, I authorize Hillsdale County Central Dispatch to obtain information from your files or other sources pertaining to my personal background including, but not limited to, the histories/records of my criminal history, driving record, and financial/credit record. I hereby waive written notice that the above information is being provided by you. Should there be any question of the validity of this authorization, you may contact me. A photocopy of this authorization shall have the same force as the original.

4. Physical Examination and Testing

I agree to submit myself, upon request, for physical examination by a physician selected by Hillsdale County Central Dispatch. In addition, I agree to submit to a pre-employment substance abuse screening test and to all searches and substance testing called for by Hillsdale County Central Dispatch.

5. Employment at Will

If hired, in consideration of my employment I agree to abide by the rules and policies of Hillsdale County Central Dispatch. I further agree that such employment and all compensation can be terminated with or without cause, and with or without notice, at any time, during the first year of employment, at the option of Hillsdale County Central Dispatch or myself.

SIGNATURE: _____ **DATE:** _____

NAME: _____ **TELEPHONE:** _____
(Type or Print)

HILLSDALE COUNTY CENTRAL DISPATCH
Self-Screening

The following requirements need to be understood by all candidates for this position classification. Please answer the following questions and sign below. This self-screening is intended for your use to help you determine whether you are making the correct decision in applying for the job of Telecommunicator at Hillsdale County Central Dispatch.

1. Are you willing to work an irregular shift schedule during your probationary period in order to accommodate training needs? This may be one week working days with Monday & Tuesday off, and the next week midnights with Wednesday & Thursday off.

Yes _____ No _____

2. Are you willing to work weekends and holidays?

Yes _____ No _____

3. Are you willing to work any shift? (Days, Afternoons, Midnights)

Yes _____ No _____

4. Are you willing to accept last minute changes in your work schedule that might require you to cancel personal plans?

Yes _____ No _____

5. Are you willing to sign up for overtime?

Yes _____ No _____

6. Are you willing to take directions from a Supervisor in front of your peers?

Yes _____ No _____

7. You may be subjected to abusive and/or profane language on the phone or in person. Are you able to deal with it unemotionally and professionally?

Yes _____ No _____

8. Because you are working either an 8-hour, 10-hour, or 12-hour shift with paid breaks and lunch periods, there may be times when you are required to delay lunch and coffee breaks due to shift activity. Are you willing to delay or minimize breaks when necessary?

Yes _____ No _____

9. Are you able to deal calmly with angry or upset people when the problem is not your fault?

Yes _____ No _____

10. Are you willing to work under constant electronic surveillance that records movement, all radio traffic, and all telephone calls?

Yes _____ No _____

11. Are you able to comprehend that when you process a call incorrectly, that it could contribute to someone's property being lost or damaged or someone being seriously injured or dying?

Yes _____ No _____

12. Are you willing to be closely supervised and questioned routinely about why you followed a certain course of action, without taking it personally?

Yes _____ No _____

13. This job requires you to copy information as it is being received, simultaneously digest what you heard and respond immediately. Is this something you would be able to do?

Yes _____ No _____

14. Are you willing to be at a console that restricts your movements to a 6 foot radius, except for your break periods during an 8, 10, 12 hour shift?

Yes _____ No _____

15. Are you willing to wear a uniform?

Yes _____ No _____

16. Are you willing to read and study several hundred pages of manuals, complete homework assignments, fill in study guides, and take written tests during your training period?

Yes _____ No _____

17. Are you willing to deal with a crises call, where a child might have died, an officer injured, a woman assaulted, and set it aside and continue to calmly deal with an irate citizen complaining of a barking dog?

Yes _____ No _____

18. If you smoke, are you willing to go without a cigarette for an entire shift if necessary?

Yes _____ No _____

IF YOU ANSWERED "NO" TO ANY OF THE ABOVE QUESTIONS, PLEASE RECONSIDER APPLYING FOR THIS POSITION.

Signature of Applicant _____ Date _____