PER-DIEM PUBLIC SAFETY DISPATCHER

MINIMUM QUALIFICATIONS:
- Over 18 Years of Age
- High School Diploma or GED
- Proficient with using computers including Microsoft Office and windows based programs
- Ability to take and follow orders
- Skilled in typing and taking hand and typewritten notes
- Strong oral and written communication skills
- Ability to multitask and work under extreme pressure in a fast paced environment
- Excellent vision (after correction) and hearing

SPECIAL QUALIFICATIONS:
- The ability to obtain and maintain various State and National Emergency Communication Certifications, including but not limited to:
  
  National Incident Management System  
  State of Connecticut Telecommunicator  
  E-911  
  Emergency Medical, Police and Fire Dispatching  
  NCIC/COLLECT

- Must be of good moral character and successfully complete the Department’s testing process, which includes, but is not limited to, written, psychomotor and oral examinations, as well as a complete background investigation and medical screening.

HOURS / COMPENSATION:
Part Time / Per Diem – Various Shifts
$ 17.86/Hour – Training Wage
$ 22.77/Hour – Following Certification and completion of the Department’s Training Program
Uniforms Provided

JOB DESCRIPTION SUMMARY:
Persons filling this position shall work for the Emergency Communications Division and shall be considered a Support Operations Employee of the Department of Police Services. General duties include, but are not limited to, receiving and transmitting emergency and administrative information for Public Safety and Municipal Agencies/Departments using all communication tools and technologies. Maintaining two-way radio contact with dispatched public safety personnel and the creating and keeping of accurate records. Dispatches, monitors and interacts with police, fire and medical calls in progress, and relays information to the public and members of the public safety community as required. Uses computers to input, retrieve and transmit information from State Motor Vehicle, National Crime Information System and other information sharing networks. Has high interaction with the general public through greeting them in person and receiving and managing emergency and non-emergency telephone calls and provides appropriate services and assistance as necessary. Responsible for other duties as assigned.

APPLICATION PROCEDURE:
Interested Persons must pick up an application packet at the Department of Police Services and or Download an Application Packet at www.oldsaybrookpolice.com. Applicants MUST follow directions as detailed in the application packet. Application materials including a non-refundable $35 examination fee are due no later than noon on Friday, December 7, 2018.

Posted – November 5, 2018
TOWN OF OLD SAYBROOK
DEPARTMENT OF POLICE SERVICES
36 Lynde Street • Old Saybrook, Connecticut 06475

Employment Application

The Town of Old Saybrook and the Department of Police Services is an Equal Opportunity Employer. State and federal law prohibits discrimination on the basis of race, color, religious creed, age, sex, marital status, national origin, ancestry, present or past history of mental disorder, mental retardation or physical disability, except in cases of a bona fide occupational qualification.

Position Applying for: Per Diem Public Safety Dispatcher – 2018

Date of Application: _______________ Date Available: _______________

How did you hear about the position? ____________________________________

GENERAL INSTRUCTIONS: Please respond to every question on this application form. If a question does not apply to you, write "n/a" in the blank space. If you need more space to respond to a question, please attach a separate sheet.

Last Name       First Name       M.I.

Address         City            State         Zip

Home Phone      Cell Phone      Work Phone

Social Security Driver’s License E-mail

If there is any other name by which you have been known that the Town should be aware of in order to adequately verify your identity, employment history or educational background, please provide any such name (s): ____________________________________

Are you either a United States citizen or authorized to work in the United States?

Yes____ No _____
(Proof of United States Citizenship or authorization to work in the United States will be required upon hiring.)
EMPLOYMENT HISTORY (Minimum 0/5 Years)

Employer: ________________________________________________

Employer's Address: __________________________________________

Employer's Telephone Number: _________________________________

Title/Position: ________________________________________________

Job Duties: ___________________________________________________

Supervisor's Name: ____________________________________________

Dates Employed: ____________________________

Starting Salary/Wage: _______________ Ending Salary/Wage: ____________

Reason for Leaving: ____________________________________________

Employer: ________________________________________________

Employer's Address: __________________________________________

Employer's Telephone Number: _________________________________

Title/Position: ________________________________________________

Job Duties: ___________________________________________________

Supervisor's Name: ____________________________________________

Dates Employed: ____________________________

Starting Salary/Wage: _______________ Ending Salary/Wage: ____________

Reason for Leaving: ____________________________________________
Employer's Address: ________________________________

Employer's Telephone Number: ________________________________

Title/Position: ________________________________

Job Duties: ________________________________

Supervisor's Name: ________________________________

Dates Employed: ________________________________

Starting Salary/Wage: ____________ Ending Salary/Wage: ____________

Reason for Leaving: ________________________________

Employer: ________________________________

Employer's Address: ________________________________

Employer's Telephone Number: ________________________________

Title/Position: ________________________________

Job Duties: ________________________________

Supervisor's Name: ________________________________

Dates Employed: ________________________________

Starting Salary/Wage: ____________ Ending Salary/Wage: ____________

Reason for Leaving: ________________________________

Have you ever been terminated from any job?  YES / NO
If yes, please explain the circumstances involved with your termination.

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________
Education

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<thead>
<tr>
<th>Name of School</th>
<th>City &amp; State</th>
<th>Major</th>
<th>Year Completed</th>
<th>Degree Earned</th>
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<td>Other</td>
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</tbody>
</table>

Use the space below to provide additional information necessary to describe your full qualifications:

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

Please list three professional references (at least one must be current):

Name ___________________________ Phone ___________________________
Address ___________________________ Years Known ________

Name ___________________________ Phone ___________________________
Address ___________________________ Years Known ________

Name ___________________________ Phone ___________________________
Address ___________________________ Years Known ________
Do you or have you used narcotics, marijuana, barbiturates, amphetamines, hallucinogenic, or any other illegal substance which may produce a dependency, with the exception of medication prescribed by a physician?  YES / NO
If yes, please list what you have used including when last used.

Have you ever been arrested in any state?  YES / NO
If yes, please explain the circumstances involved with your arrest.

Have you ever been issued a traffic infraction(s) (ticket), warning(s), or Summons in any state?  YES / NO
If yes, please explain the circumstances involved with your traffic violation(s).

I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the responses given are true, complete, and accurate to the best of my knowledge, and are made in good faith. I understand that any misrepresentation, omission or falsification may be grounds for immediate discharge.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

I authorize all of the educators, employers and professional references listed above to furnish the Town of Old Saybrook with information regarding my education, employment history or any other matter related to my application for employment with the Town of Old Saybrook, Department of Police Services.

________________________________________  _________________
Signature of Applicant                        Date
EXAMINATION INSTRUCTIONS

The written test will be held on
Wednesday, December 12, 2018 at 5:00 P.M.

The exam will be administered at the
Old Saybrook Police Department.

YOU MUST ARRIVE 15 Minutes
prior to the start of the exam.

YOU MUST BRING
photo identification.

Failure to take this written exam on
Wednesday, December 12, 2018 at 5:00 P.M.
will eliminate you from the hiring process.