

**GARFIELD COUNTY EMERGENCY COMMUNICATIONS
AUTHORITY**



EMPLOYMENT APPLICATION

Attn: Director
585 East 1st Street
Rifle, CO 81650
(970) 625-8095
(970) 625-8282 (Fax)

AN EQUAL OPPORTUNITY EMPLOYER

Garfield County Emergency Communications Authority provides all applicants with an equal opportunity to compete for openings. All selection decisions are based on job related factors without regard to an applicant's race, religion, national origin, color, sex, age or disability

INSTRUCTIONS

Each question should be fully and accurately answered. *No action can be taken on this application until all questions have been answered.* Use blank paper if you do not have enough room on this application. *Please print.* Except for signature on back of application.

--Information on this application will be verified--

Position Applied for:	Today's date:
Type of Employment sought: <input type="checkbox"/> Full Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary	Date available:

PERSONAL DATA

Last Name:	First Name:	Middle:	Home Phone:
Complete Street Address:	E-Mail:	Other Phone:	
City:	State:	Zip:	
Are you over 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a citizen of the United States or do you have a valid work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

(Proof of citizenship or immigration status will be required upon employment)

Do you have relatives working here? Yes No

(Relatives are: spouse, domestic partner, child, grandchild, parent, grandparent, sibling, mother or father-in-law, son or daughter-in-law, parent or child or sibling of domestic partner, stepparent, stepchild, or comparable legal step relationships, uncle, aunt, niece, or nephew)

If So, Name(s), Relationship(s), and Work Area:

RECRUITMENT INFORMATION

How did you first learn of this position?

- Direct contact
- GCECA Employee (Name)_____
- Advertisement
- Other_____

MILITARY

Branch of Service:	Rank/Rate at Discharge:
Active Duty Service Dates: From:	To:

Describe your service duties and any special training:

GENERAL

Have you ever applied here before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Date(s)
Have you ever been employed here before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Date(s)

Have you been convicted of a felony?
 Yes No

If Yes, describe in full:

NOTE: A Felony conviction will bar you from employment

EDUCATION AND TRAINING

Highest grade completed: _____ Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	GED certificate number: _____ Issued by/Phone No.: _____
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Name, Address (including City & State) and Phone No. of School, College or University	Dates Attended From:	Dates Attended To:	Major / Course of Study	Graduate/Degree?	Date Completed:

Other schools or training (trade, vocational, armed forces, or business). Give name and location of each school, dates attended, subjects studied, certificates, and any other pertinent data.

Was education or training received under another name? Yes No

If yes, provide other name(s) and dates used:

SKILLS

If you are an experienced operator of any business machines or equipment, including computer hardware/software, list *(include skill level and year last used)*

Do you keyboard?

Yes No

Words per minute: _____

Do you have any other skills you wish to mention? *Include date acquired, skill level and year last used:*

Special language skills - *Include skill level and whether reading, speaking, or writing:*

WORK HISTORY

INSTRUCTIONS: The Work History must be accurate and complete **or your application will be subject to rejection.** List your entire work history in order starting with your present or last job. Account for all periods of time including military service and any periods of unemployment. List each promotion as a separate job. Be thorough and specific in explaining your duties. Contact may be made with the employers listed below to discuss details of your previous employment(s) unless you specifically state that no such contact should be made.

Present or last employer		Employment Dates (Month/Year)	
		From:	To:
Complete address, include City and State		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	
Your Title	Supervisory <input type="checkbox"/> Yes <input type="checkbox"/> No	Number Supervised	Salary
Duties			

Reason for Leaving		Name of Supervisor	Telephone Number

Previous employer		Employment Dates (Month/Year)	
		From:	To:
Complete address, include City and State		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	
Your Title	Supervisory <input type="checkbox"/> Yes <input type="checkbox"/> No	Number Supervised	Salary
Duties			

Reason for Leaving		Name of Supervisor	Telephone Number

Previous employer		Employment Dates (Month/Year)	
Complete address, include City and State		From:	To:
		<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time
Your Title	Supervisory <input type="checkbox"/> Yes <input type="checkbox"/> No	Number Supervised	Salary
Duties			

Reason for Leaving		Name of Supervisor	Telephone Number

Previous employer		Employment Dates (Month/Year)	
Complete address, include City and State		From:	To:
		<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time
Your Title	Supervisory <input type="checkbox"/> Yes <input type="checkbox"/> No	Number Supervised	Salary
Duties			

Reason for Leaving		Name of Supervisor	Telephone Number

REFERENCES

Give names and addresses of three persons who are well acquainted with you and have knowledge of your qualifications for the position of which you are applying. *(Do not list relatives or repeat the names of supervised listed under work History.)*

Full Name	Complete address (Include City and State)	Telephone Number	Occupation

Is any additional information relative to change of name, use of assumed name, nickname, or maiden name necessary to enable us to check your work and/or academic record?

Yes No

If yes, explain _____

Were you ever discharged or asked to resign from any position? Yes No

If yes, explain _____

CERTIFICATION AND INFORMATION RELEASE

I hereby certify that all questions are fully and correctly answered, and I authorize Garfield County Emergency Communications Authority to contact my former employers, references furnished, and all other sources Garfield County Emergency Communications Authority sees fit, and to conduct a criminal history check, in order to verify the facts and information furnished with regard to my qualifications for the position sought. I hereby release any such employer or person from any and all liability of whatsoever nature on account of furnishing such information. I understand that if I make any misleading or incorrect statements on this application it may be rejected and, if I am employed, such statements would be cause for termination.

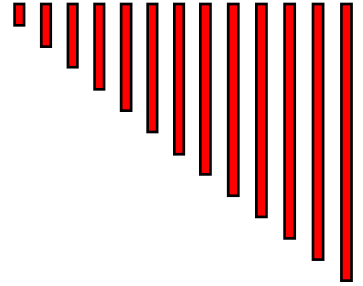
I agree to undergo a job related post-offer examination, including a drug-screening test and/or polygraph examination if required by the job. I understand that if hired, I may be subject to periodic physical examinations.

Signature: _____ Date: _____



Garfield County Emergency Communications Authority

970-625-8280
mail@GarCo911.us
585 East First Street
Rifle, Colorado
81650-2487



**DISCLOSURE TO EMPLOYMENT APPLICANT REGARDING
PROCUREMENT OF AN INVESTIGATIVE CONSUMER REPORT**

In connection with your application for employment, please be advised that we may conduct a reference check. This reference check, also known as an investigative consumer report, may include information as to your character, general reputation, personal characteristics, criminal history and mode of living. This information may be obtained by contacting your previous employers and/or references supplied by you or others.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will be given a summary of these rights together with this document.

By your signature below, you acknowledge receipt of the Discloser to Employment Applicant Regarding Procurement of an investigative Consumer Report and hereby authorize us to obtain a consumer report and/or an investigative report about you in order to consider you for employment.

**(THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR
APPLICATION, FOR YOUR APPLICATION TO BE CONSIDERED)**

Applicant's Name: _____

Applicant's Address: _____

City/State/Zip: _____

Social Security Number: _____

Date of Birth: _____

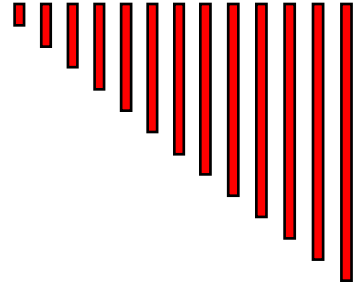
Signature: _____





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Please be advised that you have the right to request, in writing, within a reasonable time, that we make a complete and accurate disclosure of the nature and scope of the information requested. Such disclosure will be made to you within 5 days of the date which we receive the request from you or within 5 days of the time the report was first requested, whichever is later.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will be given a summary of these rights together with this document.

PLEASE KEEP THIS FOR YOUR RECORDS



A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you -- such as if you pay your bills on time or have filed bankruptcy -- to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. 1681-1681u, at the Federal Trade Commission's web site (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

•You must be told if information in your file has been used against you. Anyone who uses information from a CRA to take action against you -- such as denying an application for credit, insurance, or employment -- must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.

•You can find out what is in your file. At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.

•You can dispute inaccurate information with the CRA. If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs -- to which it has provided the data-- of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.

•Inaccurate information must be corrected or deleted. A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. **However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified.** If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.

•You can dispute inaccurate items with the source of the information. If you tell anyone -- such as a creditor who reports to a CRA -- that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In

addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.

•Outdated information may not be reported. In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.

•Access to your file is limited. A CRA may provide information about you only to people with a need recognized by the FCRA -- usually to consider an application with a creditor, insurer, employer, landlord, or other business.

•Your consent is required for reports that are provided to employers, or reports that contain medical information. A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.

•You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers. Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.

•You may seek damages from violators. If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA:	
For Questions or Concerns Regarding:	Please Contact:
CRAs, creditors and others not listed below	Federal Trade Commission Consumer Response Center - FCRA Washington, DC 20580 202-326-3761
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Controller of the Currency/Compliance Management Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Consumer and Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Programs Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Admin. 1775 Duke Street Alexandria, VA 22314 703-518-6360
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corp. Division of Compliance & Consumer Affairs Washington, DC 20429 800-934-FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board of Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator GIPSA Washington, DC 20250 202-720-7051

Job Description

Essential Knowledge, Skills & Abilities:

Communications: Must have the ability to actively listen to others for understanding of their needs & situations; ability to speak English with sufficient clarity to be understood by others on the telephone, radio or in person. Must be able to assertively control conversations in order to quickly and accurately gather pertinent information and be able to communicate this information professionally and precisely to the proper recipient. Must be able to read and understand written correspondence, memoranda and directives. Must have the ability to report events and information in writing legibly and accurately, using proper English grammar & structure.

Decision Making: Must have the ability to act in a decisive manner, using good judgment. Must have the ability to maintain objectivity in the decision-making process; the ability to effectively prioritize situations and information and make appropriate decisions based on information received. Must have the ability to learn and apply new information; the ability to handle a variety of rapidly flowing information at once; the ability to remember numerous details.

Interpersonal Relationships: Must be consistent in dealing with people; must be able to detach from callers' emotions, yet project an image of empathy (*i.e., avoid personal involvement*). Must have the ability to maintain appropriate and constructive behavior and attitude in response to difficult or adverse situations. Must have the ability and willingness to accept criticism and/or discipline; the ability and willingness to accept responsibility for actions. Must have the ability to work cooperatively with supervisors and establish cohesive, effective relationships with peers (*i.e., teamworker abilities*). Must be able to work all shifts of a 24-hour per day period and be available for emergency call-in overtime.

Professional Attitude: Must have the ability to act in a mature, dependable fashion; ability and willingness to maintain dependable work habits such as reporting to work on time, with little prompting and intervention. Must represent the organization to other agencies and citizens with a courteous, helpful, accurate and business-like attitude in all radio, telephone and personal contact. Must have the willingness & ability to respect private, confidential information; the willingness & ability to support and carry-out directives.

Quality of Work: Must be able to provide high quality, accurate work. Must be able to perform multiple tasks simultaneously; be able to do several things at one time and remain focused under stress. Must have the ability to adjust to new or unique situations; the ability to allocate own time efficiently and show initiative in completing work assignments.

Physical Abilities: Must have the ability to hear and understand sound sources coming through a communications headset and/or radio and/or standard telephone receiver. Have the ability to hear and understand other outside sound sources while wearing a communications headset (*i.e., the ability to hear sound sources not coming through the headset; ability to hear through both ears*). Must have the ability to speak and write English clearly. Must have the ability to read and discern visual images on a variety of media, including the ability to read and understand maps. Must have the ability to type accurately on a computer keyboard while conversing with callers. Must have the ability to record names and numbers accurately (*i.e., not transpose numbers and/or letters*). Must have the ability to coordinate the movements of two or more limbs together for purposes of operating radio/telephone equipment simultaneously; the ability to remain seated at the same work station for extended periods of time.

Job Description

Essential Knowledge, Skills & Abilities, continued

Technical Knowledge: Must acquire a working knowledge of public safety communications equipment, practices and procedures during the introductory period, including but not limited to:

- Knowledge of functions & operation of computer aided dispatch (CAD) system.
 - Knowledge of functions & operation of manual call-recording and dispatch system.
 - Knowledge of functions & operation of telephone console, radio console, TTY, teletype and other standard communications and/or office equipment.
 - Knowledge of proper use of ALI/ANI displays/information.
 - Knowledge of basic telephone & radio techniques/procedures for handling incoming emergency calls and dispatching response units.
 - Knowledge of proper use of emergency medical pre-arrival protocol system.
 - Knowledge of basic law enforcement complaint/dispatching terminology & codes.
 - Knowledge of basic fire/EMS complaint/dispatching terminology, codes & equipment/apparatus types & purpose.
 - Knowledge of proper responding agencies for various types of calls.
 - Knowledge of proper procedures for hazardous materials & hazardous situation calls.
 - Knowledge of legal liability issues common to emergency call taking, public safety dispatching & records keeping.
 - Knowledge of proper use of State (Colorado) and NCIC computer systems & functions.
 - Knowledge of geographical area Center serves (*i.e. familiarity with street names/layout; landmarks, numbering scheme, rivers, lakes, freeways, etc.*).
 - Knowledge of Center policies and procedures.
 - Knowledge of available resource materials & their use in performing job duties (*e.g., manuals, directories, code books, etc.*).

 - Must obtain & retain:
 - Current & valid APCO EMD certification
 - State (Colorado) Computer System and NCIC Computer System certification
-