Supervisor, Public Safety Communications

Police and Fire

Supervises, trains and evaluates Telecommunications Operators on an assigned shift.

Requires High School diploma or equivalent and at least three years of police, fire, or emergency medical dispatch experience. Prior experience with Collect and NCIC is desirable. State certification as a Telecommunications Operator within one year of appointment. Certification by APCO as a Communications Training Officer within one year of appointment.

Current Salary Range is $54,036 - $70,247. Thirty-five hour work week including holidays and weekends. Benefit package included.

Job description and Employment Application are attached.

This posting will remain open until sufficient applications are received.

The Town of East Hartford is an Equal Opportunity Employer

TOWN OF EAST HARTFORD

TITLE: Supervisor
Public Safety Communications

GRADE: 104

DEPARTMENT: Police

DATE: 11/22/02

POSITION DEFINITION: Under the general supervision of the Officer in Charge of the Communications Division, assigns, directs, supervises, trains, and evaluates Telecommunications Operators on an assigned shift. Confers regularly with superiors regarding shift effectiveness.

ESSENTIAL JOB FUNCTIONS:

- Receives, records, documents, and makes referrals of actions performed by, or complaints regarding, Communications staff, facilities, and equipment.
- Reviews and documents subordinates' performance, refers written documentation of these matters to Department management.
- Maintains files and records per Department standard operating procedures.
- Prepares narrative and statistical reports for Department management.
- Relays, implements, and enforces Departmental policies, orders, and directives.
- Records and forwards attendance records of Telecommunications staff.
- Reviews the accuracy and validity of entries made by subordinates into Collect, NCIC, and Departmental records and information systems.
- Provides relief or augments Telecommunications Operators as may be required during the shift.

ADDITIONAL JOB FUNCTIONS:

- Makes physical check of the Communications Division's physical environment, equipment status, operational readiness, and availability of necessary equipment, supplies and material at the beginning and end of each assigned shift.

KNOWLEDGE, SKILLS, AND ABILITIES:

- Knowledge of both routine and emergency communications practices.
- Ability to type accurately and rapidly.
- Ability to operate LAN and PC based word processing and related software.
- Ability to work rotating shifts and overtime as required.
- Ability to plan, organize, direct and evaluate the work of others.
- Ability to deal firmly, effectively and impartially with subordinates, associates and the public.
- Uses a computer terminal to enter and retrieve information.
- Ability to access and process information contained in file records and computer databases.
- Ability to deal effectively with high-stress situations.

KNOWLEDGE, SKILLS, AND ABILITIES (cont'd):

- Bilateral hearing ability based on a puretone threshold between 0-25 decibels, with a frequency range between 500-3000 cycles.
- Binocular vision correctable to 20-20, with no colorblindness.
- Well-modulated voice, with distinct enunciation.
- Ability to remain seated for extended periods of time.

PHYSICAL AND MENTAL EFFORT, AND ENVIRONMENTAL CONDITIONS:

- Works in office setting subject to continuous interruptions and background noise.
- Includes exposure to video display terminals on a daily basis.
- Must be able to work under stress from demanding deadlines and changing priorities and conditions.
- Ability to operate equipment requiring eye and hand coordination and mechanical aptitude.
- Ability to work independently with minimum supervision.

JOB QUALIFICATIONS:

- Requires graduation from an accredited High School or its equivalent, and at least three years of police, fire, or emergency medical dispatch experience, **or**
- Comparable time spent as a police supervisor with the rank of Sergeant or higher, or as a fire supervisor with the rank of Lieutenant or higher in a full-time career department.
- Must pass Police Department background investigation.
- Prior experience with Collect and NCIC is desirable.

LICENSING REQUIREMENTS:

- Valid Connecticut Motor Vehicle Operator's License
- State Certification as a Telecommunications Operator within one year of appointment.
- Certification by APCO as a Communications Training Officer within one year of appointment.
- Eligibility for commissioning as a Connecticut Notary Public.
- Additional certifications as Medical Response Technician or higher, Police Officer, or Firefighter II are desirable.

The above tasks and responsibilities are illustrative only. The description does not include every task or responsibility.

TOWN OF EAST HARTFORD

740 Main Street
East Hartford, Connecticut 06108
www.easthartfordct.gov

Phone
(860) 291-7220

APPLICATION FOR EMPLOYMENT

Equal Opportunity Employer

APPLICANT'S NAME (LAST, FIRST, MIDDLE)				
STREET ADDRESS	CITY/TOWN	STATE	ZIP CODE	HOW LONG?
TELEPHONE NUMBER (HOME)	TELEPHONE NUMBER Work ( )_____ Cell ( )_____			
POSITION APPLIED FOR Supervisor, Public Safety Communications				
ARE YOU AT LEAST 18 YEARS OLD? ☐ YES ☐ NO	ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES? ☐ YES ☐ NO			
AVAILABILITY ☐ FULL-TIME ☐ PART-TIME	DATE AVAILABLE FOR WORK			

EDUCATION

Did you graduate from high school? ☐ Yes ☐ No	If "No", highest grade completed:_____
Name of high school:_____ Address:_____	Do you have a high school equivalency Certificate ☐ Yes ☐ No Place HS equivalency was granted:_____

List all colleges, business schools or technical schools you attended in chronological order, most recent listed first:

School	Address	Course/Major	Degree/Certificate

List any licenses or certificates required for the position for which you are applying (*e.g.*, CDL, nursing, engineering), including date of issue, issuing authority, expiration date and license/certificate number.

List any special courses, training programs or other training that is relevant to the position for which you are applying, including name and location where training was given, certificate received, if any, dates attended, subject of training, number of hours weekly (attach additional sheet if necessary).

List any office equipment or machinery you can operate that is relevant to the position for which you are applying.

RECRUITING INFORMATION How did you hear about this job? (Please check one)	☐ Newspaper Name of Newspaper:_____	☐ Community Agency Please give name:_____
	☐ Town Employee Name_____	☐ Internet name of website:_____
	☐ Referral Service Please give name:_____	☐ Other _____

02/08

List below, chronologically (most recent dates first) each place you were employed, omitting none (attach additional sheet(s) if necessary). Give correct, full addresses, and dates of non-employment in proper sequence. Include all part-time employment.

YOU MUST COMPLETE THIS SECTION EVEN IF YOU ARE ATTACHING A RESUME

IMPORTANT: May we contact your present employer? ☐ YES ☐ NO

Name of Employer			Job Title	
Address	City		State	Zip Code
Dates of Employment:	Name and Title of Supervisor		Telephone Number	
From _____ / _____ (month / year)	Description of duties, responsibilities, and significant accomplishments:			
To _____ / _____ (month / year)				
Salary:				
Starting $_____ per_____				
Ending $_____ per_____				
# Hrs. Worked Weekly	Reason For Leaving			

Name of Employer			Job Title	
Address	City		State	Zip Code
Dates of Employment:	Name and Title of Supervisor		Telephone Number	
From _____ / _____ (month / year)	Description of duties, responsibilities, and significant accomplishments:			
To _____ / _____ (month / year)				
Salary:				
Starting $_____ per_____				
Ending $_____ per_____				
# Hrs. Worked Weekly	Reason For Leaving			

Name of Employer			Job Title	
Address	City		State	Zip Code
Dates of Employment:	Name and Title of Supervisor		Telephone Number	
From _____ / _____ (month / year)	Description of duties, responsibilities, and significant accomplishments:			
To _____ / _____ (month / year)				
Salary:				
Starting $_____ per_____				
Ending $_____ per_____				
# Hrs. Worked Weekly	Reason For Leaving			

Have you ever been discharged from a place of employment for cause? ☐ YES ☐ NO

If yes, please describe _____

CERTIFICATION (READ CAREFULLY)

I hereby certify that the information I have provided on this application, including any attachments, is true and complete. I understand that if I falsify, omit or misrepresent any information on this application, or during an employment interview, should I be granted one, I may be disqualified from the selection process or discharged from employment, whenever the falsification or omission is discovered.

I understand that all statements made on this application are subject to verification. I authorize all persons or organizations listed on this application, except my current employer if noted above, to provide the Town with any and all information they may have concerning my previous employment, personal history, education and any other subjects covered by this application, and hereby release them, the Town, and the Town's current and former agents and employees from liability for any harm resulting from the disclosure of such information.

I understand that this application is not an employment contract, job offer or guarantee of employment. I further understand that if I receive a job offer, it is conditioned on my satisfactory completion of a criminal history check, drug test, medical examination and any other conditions listed in the job offer letter.

Signed_____ Date_____

Name: _____ **Position Applied For**_____

References: List below three individuals who can describe your qualifications for this position, preferably supervisors, professors, colleagues, etc.

Name:_____

Address:_____

Job Title:_____

Name of Work Place:_____

Phone:_____

Name:_____

Address:_____

Job Title:_____

Name of Work Place:_____

Phone:_____

Name:_____

Address:_____

Job Title:_____

Name of Work Place:_____

Phone:_____

TOWN OF EAST HARTFORD
CRIMINAL CONVICTION INFORMATION

You are required to list any criminal conviction, regardless of the nature, date or location of the conviction, except for minor traffic offenses or a conviction that has been erased under Connecticut law. Attach additional sheets of necessary.

The types of criminal records subject to erasure under Connecticut law are: (a) a finding of delinquency or that a child was a member of a family with service needs; (b) a sentence as a youthful offender; (c) a criminal charge that was dismissed or "nolled"; (d) a criminal charge for which you were found not guilty; and (e) a conviction for which you received a full pardon. If your only criminal record consists of items that have been erased under Connecticut law, then you are deemed never to have been arrested with respect to the erased proceeding and may swear so under oath.

This information will be made available only to the members of the Human Resources Department and to those persons interviewing the candidate.

A criminal conviction will not necessarily disqualify you from the application process, but will be considered as it relates to the position you are seeking and in light of any applicable state or federal law.

Date of Conviction	Offense	Location of Conviction (City and State)	Sentence	Date Sentence Completed

The information provided above is subject to all of the terms and conditions set forth in the certification on page 3 of the employment application form.

_____ _____
Name (Print) **Position You Are Seeking**

_____ _____
Applicant's Signature **Date**

AUTHORIZATION & RELEASE

(GENERAL EMPLOYMENT)

TOWN OF EAST HARTFORD
DEPARTMENT OF HUMAN RESOURCES
740 MAIN STREET
EAST HARTFORD, CT 06108
(860) 291-7221

DISCLOSURE NOTICE TO JOB APPLICANTS

In connection with your employment application, a consumer report, and/or an investigative consumer report including information with respect to your credit history, criminal convictions, motor vehicle violations, employment history, education, character, general reputation, and personal characteristics, whichever are applicable, may be made. You have the right within a reasonable period of time after receipt of this notice to make a written request for additional information as to the nature and scope of the investigation and a written summary of your rights under the Fair Credit Reporting Act. Such requests should be mailed to the address above.

In consideration of the Town of East Hartford's acceptance of my application to be considered for employment with the Town, I hereby voluntarily authorize the Town of East Hartford and its officers, officials, employees and agents to conduct a personality survey and to investigate my past employment history and activity, educational background, financial records, medical records, military records, criminal records, motor vehicle records, background investigation records, or whatever confidential or privileged information necessary to complete this investigation of my suitability to become an employee of the Town.

I hereby agree to cooperate in such investigation and acknowledge receipt of the above Disclosure Notice. I understand and agree that the Town may use copies of this Release to obtain information about me from whatever sources it deems necessary to interview, and expressly authorize such sources to provide assistance to me and the Town in my efforts to be employed by the Town of East Hartford. I also request that sources contacted by the Town accept a photocopy of this Release in lieu of an original, and hereby release and agree to indemnify and hold harmless any and all persons, including corporations and other business entities who may assist the Town in its efforts to determine whether or not I am a suitable candidate for employment.

I hereby acknowledge that I have read and fully understand the contents of this document and have freely signed same. I also agree that, if hired, this authorization shall remain on file and shall serve as an ongoing instrument for the Town of East Hartford to procure investigation reports at any time during my employment period.

This form must be notarized or witnessed by EHHRD in order to be considered for employment

Signature:_____ **Date Signed:** _____

Print Name: _____ **Social Security No.:** _____-_____-_____

Address: _____ **State:** _____ **Zip Code:** _____

Subscribed and Sworn to before me, a Notary Public, in and for County of _____, **and State of** _____, **this** _____ **day of** _____, **20**____.

_____ _____

Notary Public /or **My Commission Expires:**

_____

Witness -East Hartford Human Resource Dept. **Revised 02/08**