



CenCom E 9-1-1 Public Safety Communications Center

911 N. Lotus Drive • Round Lake Beach, IL 60073-2444 • Phone (847) 270-9111 • Fax (847) 270-9115

Dear CenCom, E9-1-1 Applicant,

Please accept this letter as my greetings and welcome to CenCom E9-1-1. As you complete your application to work at CenCom E9-1-1, I strongly urge you to review the entire application packet. CenCom has worked hard to make our application packet as informative as possible. It has been our experience that while the field of Public Safety Communications seems appealing to a wide variety of people, the actual work and hours required are not always appealing.

We have included a pre-employment checklist for you to review. This checklist covers many issues that have raised issues for some employees. Please review this checklist and if applicable go over it with your family or whomever you feel is important. Upon reviewing this checklist if you feel that this position is one you are interested in and capable of performing please complete and return the required application materials.

PLEASE READ THE FOLLOWING INSTRUCTIONS:

1. Please complete the entire four (4) page application completely. All areas must be filled in even if a resume is attached. The application must be signed and dated.
2. Please complete the waiver and consent form. This form is required so that CenCom can begin a thorough background of an applicant as they move forward in the hiring process. This form must be signed in front of another person and the witness's signature is required.
3. Please complete the Illinois State Police conviction information name check request. The boxes that are identified with an asterisk (*) in front of them need to be completed. This information is also needed to begin our required background investigation.
4. Please review and complete the check list and submit it with the packet.

Failure to complete the application completely could result in your removal from the hiring process. All four (4) forms (Application, Waiver and Consent, Conviction Information name check request and the Employee Check List) are to be returned from the application packet.

Applications can be dropped off in person, mailed or emailed to adminsec@cencom911.net to CenCom, (Attention: Application) for review. Please **do not fax applications**.

Applications will be reviewed, and those applicants that meet or exceed our minimum requirements will be contacted to take a written and typing exam at our next scheduled testing period. I appreciate your interest in CenCom and wish you the best of luck in our hiring process.



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CENCOM E9-1-1 PRE – EMPLOYMENT CHECKLIST

CenCom E9-1-1 has found that the field of Public Safety Communications is not a field suited to every person who applies to work as a Telecommunicator. Many applicants consider only parts of the job such as pay and benefits instead of looking at the less attractive aspects including working shift work, weekends and holidays.

While there are many satisfying, rewarding aspects the position of Telecommunicator and 9-1-1 Telecommunicators make significant contributions to the welfare and safety of their fellow citizens, it is important for all applicants to carefully consider **both** the negative and positive features of a new career **before** considering the position.

The job factors listed below are features of the Telecommunicator position about which many applicants are unaware. This questionnaire should be taken home, considered carefully and if pertinent, discussed with your family or whomever else you feel is important. If you are concerned about any of these items, you may discuss your concerns with the Director.

Should you be successful in passing all the phases in the testing process and are offered a position, you will be given a new form and asked to sign each line. The form will then become part of your permanent personnel folder.

No.	WORKING ENVIRONMENT	Initial
1	You must have regular and predictable attendance.	
2	You must arrive for work at least 5 minutes prior to your shift.	
3	Required to work different shifts in a 24x7 work environment.	
4	You will have no choice about which shift you are assigned to work.	
5	You will have no choice about which days you work.	
6	You will be required to work all shifts, including during the training period.	
7	Required to work weekends.	
8	Work any or all Federal, State and religious holidays on the recognized or actual date.	
9	Work on personally important or special days (birthdays, anniversaries, sporting events, etc).	
10	Obtain childcare between 6:30 am – 7:30 pm (days); and/or 6:30 pm – 7:30 am on a regular basis.	
11	As necessary, obtain childcare for weekends and holidays on a regular basis.	
12	As necessary, obtain childcare on short notice events on a frequent basis.	
13	Work voluntary overtime, before or after a shift, sometimes with little to no notice.	
14	Work mandatory overtime, before or after a shift, sometimes with little to no notice or on a regularly scheduled day off.	
15	You must have reliable transportation that functions in the 24 hour environment.	
16	You must be willing to carry a pager and contact the Department when requested.	
17	You must be willing to conform to the prescribed uniform.	
18	Telecommunicators must remain seated at their workstation for extended durations of time. There are limited breaks and you are not able to just get up and walk around.	
19	Telecommunicators are not allowed to leave the building during their lunch breaks.	
20	Telecommunicators must be willing work through a highly structured “chain of command”.	

CENCOM E9-1-1 PRE EMPLOYMENT CHECKLIST - CONTINUED

No.	WORKING ENVIRONMENT	Initial
21	Telecommunicators will work with all phone and radio activities monitored/taped.	
22	Telecommunicators must be able to work in accordance with a disciplinary policy.	
23	Work at a radio console and computer terminal for a full shift (12 hours).	
24	Work at a console with multiple computer monitors, radios and telephones, while multi-tasking seamlessly between each system while being able to type accurately.	
25	Workstations are in a confined room with low lighting.	
26	Work in a high stress environment.	
27	You must be willing to get along with your co-worker(s).	
28	Receive criticism from co-workers, law enforcement officers, and/or civilians	
29	During training, be regularly reminded of errors and mistakes.	
30	During training, receive a daily rating of your job performance including criticism.	
31	Continual training will be required even after your probationary period.	
32	Ability to record the information the caller is giving you into the computer in real time.	
33	Work at a rapid pace over which you have little to no control	
34	Maintain intense concentration and attention for extended periods of time.	
35	Work well with people from a variety and diverse backgrounds.	
36	Must be able to perform job functions while remain professional and courteous.	
37	Must be able to work in an environment with little or no praise for regular job functions.	
38	Must be willing to report for duty in case of a natural or man-made disaster.	
39	Smoking is prohibited in the building.	
40	Give specific directions or instructions to callers when they are requesting police services	

Failure to comply or withstand any or all of the above defined work environment issues, may result in disciplinary action being taken against you.

No.	TYPES OF CALLS HANDLED BY TELECOMMUNICATORS	Initial
1	Answer telephone calls where someone screams at you.	
2	Answer telephone calls where the caller directs obscene language at you.	
3	Answer and respond to telephone calls where the caller is hysterical, intoxicated, irrational, or confused.	
4	Answer and respond to telephone calls in which the caller is difficult to understand.	
5	Answer telephone calls from suicidal subjects.	
6	Answer, handle and/or transfer fire and rescue calls quickly and accurately.	
7	Answer and respond to calls where a violent crime is in progress.	
8	Make quick decisions on which one or more person's safety is at stake.	
9	Prioritize calls to be dispatched, deciding which is most serious.	
10	Answer calls where the caller does not speak English as their primary language and Still attempt to provide service to them using a variety of skills and tools.	

With my signature below, I state that I have read, considered and understand each item.

Signature

Date

Print Name

Agency Review



CenCom E9-1-1

Public Safety Communications Center
911 N. Lotus Drive
Round Lake Beach, IL 60073

APPLICATION FOR EMPLOYMENT

It is the policy of CenCom to maintain and promote equal employment opportunity without discrimination based on race, color, religion, gender, age, physical disability, political affiliation, national origin or any other legally protected status, in accord with applicable legal requirements.

CenCom is a 9-1-1 Public Safety Communications Center which provides emergency service to our communities. We are open 24 hours a day, 365 days a year. If you become an employee of CenCom, you will be required to work one of two shifts including weekends and holidays. You will be subject to a thorough background check prior to employment.

Date of Application _____

PERSONAL INFORMATION

Name _____ Home Phone _____
Last First Middle Area Code Number

Present Address _____
Number Street City State Zip Code

Driver's License No. _____ State _____ Expiration Date _____

Is your Driver's License Valid? ___ Yes ___ No Any Restrictions? _____

How did you learn of this opening? _____

Have you ever applied here before? ___ Yes ___ No If yes, when? _____

Have you ever worked here before? ___ Yes ___ No If yes, when? _____

Do you have any relatives or friends that work for CenCom ___ Yes ___ No If yes, who? _____

What languages, other than English, do you speak and/or write fluently? _____

Indicate experience with the following: Typing _____ wpm CPR certified? ___ Yes ___ No

Are you over 18? ___ Yes ___ No Are you legally authorized to work in the United States? ___ Yes ___ No

Have you every been convicted of a crime, excluding minor traffic violations? ___ Yes ___ No

If yes, state the offense, location, date and disposition _____

EMPLOYMENT DESIRED

Are you seeking _____ full-time _____ part-time _____ temporary or summer employment?

Position applying for _____ Salary Desired _____

If hired, on what date would you be available to start work? _____

Are there any days or hours you would be unable or unwilling to work? _____ Yes _____ No

If yes, please specify those days or hours you would be unable or unwilling to work _____

EDUCATION

TYPE OF SCHOOL	NAME AND ADDRESS	YEARS ATTENDED	GRADUATED	COURSES STUDIED
HIGH SCHOOL			YES _____ NO _____	DIPLOMA:
COLLEGE			YES _____ NO _____	DEGREE:
OTHER			YES _____ NO _____	DIPLOMA:

Are you a veteran of the U.S. Military? _____ Yes _____ No If yes, Branch _____ Rank _____

Are you currently or have you been in the National Guard or Reserves? _____ Yes _____ No

PERSONAL REFERENCES

(Excluding former employers or relatives)

PLEASE INCLUDE COMPLETE INFORMATION

NAME AND OCCUPATION	ADDRESS	PHONE NUMBER
1.		
2.		
3.		

EMPLOYMENT HISTORY

List your last three employers, starting with your present or most recent employer. Include military, part-time, summer, relevant volunteer work and any periods of unemployment.

Employer: _____ Telephone: _____ From: _____
Month Year
Address: _____ To: _____
Month Year
Supervisor's name and title: _____ Full Time ____ Part Time ____
Your title: _____ Hours per week _____
Your duties: _____ Last salary _____
_____ May we contact this employer?
Reason for leaving: _____ ____ Yes ____ No

Employer: _____ Telephone: _____ From: _____
Month Year
Address: _____ To: _____
Month Year
Supervisor's name and title: _____ Full Time ____ Part Time ____
Your title: _____ Hours per week _____
Your duties: _____ Last salary _____
_____ May we contact this employer?
Reason for leaving: _____ ____ Yes ____ No

Employer: _____ Telephone: _____ From: _____
Month Year
Address: _____ To: _____
Month Year
Supervisor's name and title: _____ Full Time ____ Part Time ____
Your title: _____ Hours per week _____
Your duties: _____ Last salary _____
_____ May we contact this employer?
Reason for leaving: _____ ____ Yes ____ No

Use the space below to describe why you are interested in working for our company and to list those skills and abilities which you feel particularly qualify you for a position with us.

AFFIDAVIT

I understand that nothing in this application creates an employment contract or relationship. I also understand that if hired by CenCom, my employment can be terminated at any time, by myself or CenCom for any grounds not prohibited by law.

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, any misstatement or omission of information on this application may be grounds for dismissal. I authorize the investigation of all statements contained herein and information concerning my previous employment and any pertinent information there may be personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

If you are employed by CenCom in a part time or full time position, you will receive a copy of CenCom’s Staff Policy Manual. This manual provides information regarding employment policies and benefits. The information contained in the manual may be changed at any time at the discretion of the Operations Board and management. The Staff Policy manual is not a contract of employment nor does it create vested rights in any policy listed. It should only be applied generally.

I, _____, under penalties of perjury as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, hereby certify that the statements set forth in this instrument are true and correct.

Signature _____

Date _____

COMPANY USE ONLY

Interviewed by: _____ Date: _____

Interviewers remarks:

CONVICTION INFORMATION NAME CHECK REQUEST

(Please see the reverse side for instructions on completing this form)

(All fields marked in BOLD are mandatory)



Transaction Control Number

Document Control Number

Submitting Agency ORI - NCIC (if applicable)

IL 0 4 9 0 1 5 N

Cost Center
(Office Use Only)

Subject's Last Name

First Name

Middle Name

*

*

*

Date of Birth

Sex

Race

*

*

*

The code values used in the Illinois State Police name search must include valid national crime information center code values for certain fields. These fields include sex codes and race codes. The standard code values for sex codes include "M" for Male, "F" for Female, or "U" for Unknown. The standard code values for race codes include "W" for White (includes Mexicans and Latins), "B" for Black, "A" for Asian/Pacific Islander, "I" for Indian/Alaskan Native, or "U" for unknown. If your submission contains values other than the standard code values, the search results could be adversely affected.

Social Security Number

Drivers License Number

DL State

*

*

*

Requestor's Name

Agency/Company Name

Lisa Berger

CenCom E9-1-1

Return Address

Street Address: 911 N. Lotus Drive

City: Round Lake Beach

State: Illinois

Zip: 60073

Foreign State/Country

Foreign Postal Code

Licensing or Employment Purpose

(Yes)

(No)

Subject's Maiden Last Name

First Name

Middle Name

*

*

*

Please complete all areas marked with an asterisk

* Signature: _____

* Date: _____

Please type or print all information



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WAIVER AND CONSENT

I request, authorize and consent to the release of information to CenCom regarding my previous employment and authorize all past employers or agents which CenCom may designate, to respond to oral or written inquiries from CenCom regarding my employment record, including, but not limited to, positions held, dates of employment, last pay raise, work performance, disciplinary records, reliability, incidents of dishonesty, insubordination, violence, and/or unsafe, harmful, or threatening behavior or the like. In order to determine my fitness for employment with CenCom, I agree to submit to an independent medical examination which shall include drug and alcohol testing, and I agree to submit to a psychological examination. I do knowingly, freely and voluntarily release, remise and discharge CenCom, each member municipality, and the respective boards of the member municipalities and CenCom, their agents, officers, representatives, elected officials, employees and independent contractors, from any and all liability claims, causes of action or damages arising out of, or as a result of, any written or oral inquiry or any information provided or released, as a result of any written or oral inquiry, or from my submission to the medical examination, drug and alcohol testing or psychological examination referenced herein. I assume all risk of loss or damages for the testing, release of information or administering or taking of the examinations or tests. I also release any and all of my former employers, and their representatives, employees or the like, from any and all liability which may result from the information supplied by them to CenCom. I hereby certify that any and all statements made as part of my employment submission or application to CenCom are true and correct and I agree and understand that any misstatement of material fact made by me in the application process will cause a forfeiture on my part of employment with CenCom on such terms as may be determined solely by CenCom and its Board. If I am employed by CenCom, I agree to provide any and all additional documentation necessary for employment with CenCom.

Signature

Witness Signature

Name (Print)

Name (Print)

Date

Date