

APPLICATION FOR EMPLOYMENT

SOUTH BAY REGIONAL PUBLIC COMMUNICATIONS AUTHORITY

4440 West Broadway, Hawthorne, California 90250 Telephone (310) 973-1802 Fax (310) 978-0892 www.RCC911.org

An Equal Opportunity Employer

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Application for (Please enter exact position title)						
GENERAL INFORMA	ATION					
Name (Last)		(First)		(Middle Initial)	Home Telephone	
Address (Mailing Address)		(City)	(State	e) (Zip)	Mobile Telephone	
E-Mail Address			,			
Do you have a valid California Driver's License? Yes No						
Person who referred you to SBRPCA? Are you available to work shift work or weekends? Yes No						
How did hear about us (Job Fair, website, referral, etc.)?						
Are you available to work overtime? ☐ Yes ☐ No						
Can you provide a birth certificate or other proof of US Citizenship or proof of permanent resident status? 🗌 Yes 🗌 No						
Have you ever worked for SBRPCA? ☐ Yes ☐ No						
Do you have relatives working for SBRPCA? ☐ Yes ☐ No						
Were you ever discharged, rejected during probation, or have you ever resigned under pressure or unfavorable circumstances from any employment? ☐ Yes ☐ No						
If yes, explain						
A. Have you ever been convicted by any court of any offense? Yes No						
 You may omit: Traffic violations for which the fine imposed was \$30 or less. Any offense which was finally adjudicated in a Juvenile Court or under a Youth Offender Law Any incident that has been sealed under Welfare and Institutions Code Section 781 or Penal Code Section 1203.45 						
B. Has your driver's lic	ense ever been s	suspended or revoked	? 🗌 Yes 🗌 N	0		
If your answer for Ques each. Use additional sh			enses below. In	nclude date, location,	nature and disposition for	
EDUCATION						
Did you graduate high s	school? 🗌 Yes 🗀] No If not have you pa	assed the G.E.	D test? 🗌 Yes 🗌 N	0	
Name and location of H	ligh School	Date Completed				
Name and Location of Col or Trade Schools Attended		Dates Attended	Years/Credits Completed	Major Area of Study	Degree or Diploma Date	

EXPERIENCE Begin with your most recent experience. List all experience in the last ten years, including U.S. Military Service and periods of unemployment. Give details on the experience, which you believe meets the entrance requirements for this position. Go back more than ten years if necessary. List any volunteer experience, which you feel helps you meet the requirements of the job for which you are applying. Show actual time (number of hours/days, number hours/weeks) spent in such experience with "Volunteer" in the space following salary. **Employer** Dates (Month/Year) Address From To Job Title Hours per week Job Duties Immediate Supervisor Telephone Number Reason for Leaving **Employer** Dates (Month/Year) From To Address Job Title Hours per week **Job Duties** Immediate Supervisor Telephone Number Reason for Leaving Dates (Month/Year) **Employer** Address From To Job Title Hours per week Job Duties Immediate Supervisor Telephone Number Reason for Leaving **Employer** Dates (Month/Year) Address From To Job Title Hours per week Job Duties Telephone Number Immediate Supervisor Reason for Leaving **Employer** Dates (Month/Year) From Address To Hours per week Job Title Job Duties Telephone Number Immediate Supervisor Reason for Leaving Dates (Month/Year) Employer Address From To Job Title Hours per week Job Duties Immediate Supervisor Telephone Number Reason for Leaving Additional information you consider pertinent to the job applied for Can we contact your present employer? ☐ Yes ☐ No I hereby certify that all statements made in this application are true and complete to the best of my knowledge and belief. I authorize SBRPCA to investigate my qualifications, employment record or character through inquiries to any source mentioned in this application, unless otherwise stated in this application, and I understand and agree that any misstatements or omissions of material fact herein may cause forfeiture on my part of all rights to employment with SBRPCA Appointment to any position is subject to your meeting all of the medical and security requirements of this agency. You will not be entitled to any compensation if you do not meet these requirements. Date Signature

COMMUNICATIONS OPERATOR

Supplemental Application Form

This Supplemental Application Form is part of the examination process. You <u>must</u> complete this supplemental application form and submit it with the application at the time you file.

Experience has shown that many applicants for the Communications Operator-Trainee position consider only the positive aspects of the job, while ignoring some of the less attractive features. As a result, when new employees encounter the negative job features they sometimes react by leaving the job well before training is completed (sometimes in only a few months). Early resignations which result from a lack of accurate job knowledge contribute to a much higher than desirable attrition rate among Communications Operators.

It is important for all applicants to carefully consider <u>both</u> the negative and positive features of a new career before deciding to test for the position.

The job factors listed below are features of the Communications Operator-Trainee position, if any of these factors present problems for you we strongly suggest that you consider making alternative employment choices which may better fit your career goals.

Read and carefully consider each statement below, check the boxes that correspond to the factors that you find acceptable.

WOR	KING	<u>ENVIRONMENT</u>			
	1.	Be unable to physically leave worksite (i.e. walk around, use the restroom, get coffee, etc.) at any time other than specifically authorized breaks and 30 minute lunch.			
	2.	Be unable to schedule your own lunch or rest breaks.			
	3.	Be unable to eat at your console or workstation at any time.			
	4.	Work at a small, confined work area in a room with low lighting and little neutral lighting.			
	5.	Have a very limited opportunity to socialize with your fellow workers during your work shift.			
	6.	Work within an organization structured on a military model (i.e. conform to grooming standards and work through a highly structured chain of command).			
	7.	Be able to work under high levels of stress.			
	8.	Work at a rapid pace over which you have little control.			
	9.	Maintain intense concentration and attention for extended periods of time.			
	10.	During training and a 15 month probationary period receive a <u>daily</u> rating of your job performance and constructive criticism including discussions of errors and mistakes.			
WORK SCHEDULE					
	11.	Be required to work a 12 hour shift.			
	12.	Be required to work weekends on a regular basis.			
	13.	Work Thanksgiving Day, Christmas Day, New Year's Day, and all other holidays.			
	14.	Have no choice about what shift you are assigned to work or which days you work			
	15.	Occasionally fail to receive consecutive days off.			
	16.	Have to arrange for reliable transportation to work.			
	17.	Be prepared to work immediately when your shift begins. Tardiness is unacceptable and is cause for severe disciplinary action.			
	18.	During on the job training, have to work the same shift days and hours as your trainer.			
	19.	Change work shift, days off, or cancel holiday plans on short notice.			
CALL	. TYPI	<u> </u>			
	20.	Answer telephone calls and have someone scream at you.			
	21.	Answer telephone calls and have the caller direct obscene language toward you.			
	22.	Answer and respond to telephone calls where the caller is drunk, irrational, or confused.			
	23.	Answer and respond to calls when a violent crime is in progress.			
	24.	Answer and respond to telephone calls in which the caller is almost impossible to understand.			
	25.	Make quick decisions in which one or more person's safety is at stake with limited information.			
	26.	Tell people who expect police, fire, or local government service that their problems do not require dispatching someone.			
	27.	Handle life threatening emergency situations over the radio that involve police officers and fire fighters while maintaining a professional demeanor.			
With m	y sign	ature below, I state that I have read and considered each factor listed.			
Signatu	ıre				