



GRADY COUNTY SHERIFF'S OFFICE

STATE OF OKLAHOMA

SHERIFF GARY BOGGESS • UNDERSHERIFF KORI BREWER

Main Office: 302 N. 3rd • Chickasha, OK 73018 • (405) 222-5085 Phone • (405) 222-1096 Fax

EMPLOYMENT APPLICATION

Dispatcher

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER: The Office of the Sheriff, Grady County, State of Oklahoma, does not discriminate on the basis of race, color, sex, national origin, age, marital or veteran status, political affiliation, handicapped status, or any other legally protected status.

Warning: All information in this application will remain confidential; however, it will be subject to extensive background examination and possible polygraph. Any false, misleading, or incomplete statements will be considered grounds for rejection. Leave no blank spaces. If the questions do not apply to you, mark N/A (Not Applicable).

Print or type the answers to each question clearly and completely. All questions must be answered. This is an application for employment and no employment contract is being offered. If needed, use additional pages for more information.

Applicant

Date of Application		
Last Name	First Name	Middle Name
Social Security Number		Date of Birth
Street Address		City, State, Zip Code
Home Phone		Cellular Phone
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		Race <input type="checkbox"/> White <input type="checkbox"/> Black or African-American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Prefer not to say <input type="checkbox"/> Other _____

Date Available to Work	Position Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Days/Hours Available	Shifts Available <input type="checkbox"/> Shift Work <input type="checkbox"/> Weekends <input type="checkbox"/> Nights
Have you ever worked for this County? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, provide prior dates
Reason for Leaving	

Are you a citizen, lawful permanent resident or otherwise authorized to work in the United States? (Verification will be required upon employment and failure to furnish documentation will be cause for separation.) <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you OLETS Certified? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you licensed to operate: <input type="checkbox"/> Automobile <input type="checkbox"/> Motorcycle <input type="checkbox"/> Airplane <input type="checkbox"/> Helicopter <input type="checkbox"/> Drone		
License Number	State or Authority	Date of Expiration

Are you related to any County Employee or any other member of the County Commissioners or County Offices? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide a description of your relationship
Have you ever applied with the Grady County Sheriff's Office before? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, when did you apply?
Do you know any Grady County Sheriff Deputies? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, who?
How did you learn about this opening?

It is imperative that law enforcement personnel have a clean felony conviction record (arrest information will not disqualify you). Have you ever received a felony conviction by any court of law or enforcement body anywhere?

☐ Yes ☐ No

If yes, please explain below:

Have you ever been arrested?

☐ Yes ☐ No

If yes, please explain below:

Are you currently using any controlled substance such as a narcotic, speed, PCP, barbiturate, amphetamine, LSD, cocaine, crack, heroin, marijuana, etc. that was not prescribed for you by a medical professional?

☐ Yes ☐ No

If yes, please indicate the type of drug, the date of use, and extent of usage:

Are you currently sniffing or inhaling glue, paint, lacquer, gas, or any other substance with the intent of getting high or intoxicated?

☐ Yes ☐ No

If yes, please indicate the particulars below:

In the last seven years:

How many traffic tickets have you received?

#

Number of times arrested driving under the influence of drugs or alcohol?

#

Number of accidents you were involved in as a driver for which you were charged or cited?

#

Have you been involved in a serious accident(s) where you were the driver?

☐ Yes ☐ No

Have your privileged ever been restricted?

☐ Yes ☐ No

If yes or anything other than none to the above, please explain:

Have you applied with any other law enforcement agency in the last five (5) years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, when?	

Indicate if you have any additional information or comments concerning any volunteer experience, any special licenses or training, which would help us determine your suitability for this position:
--

If you have had no prior employment experience, please explain what you have done since High School to prepare for this job:
--

Residence

(List each and every place you have resided in the last seven years)

From Month/Year	To Month Year	Address	City, State	Name of Landlord

After reviewing the essential job functions, the minimum qualifications and the special requirements from the attached job description, are you able to perform these duties with or without reasonable accommodations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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The County is concerned with your ability to perform the job and will not at this time consider your need for reasonable accommodation. If after reviewing your application form, verifying your responses, conducting an intensive background investigation, conducting necessary interviews or tests, you are considered for the job and would need reasonable accommodation to perform the essential job functions, the parties will explore these alternatives. REMEMBER: The County conducts a pre-employment exam, which will determine whether you can do the essential functions of the job without substantial risk to yourself or the public.

Education

As you complete the next portions, provide us with prior education, work experience, and any relevant training or certificates and licenses that would indicate your knowledge, skills, and abilities to perform the job. Be as specific as possible since you will be screened on what you include regardless of what you might otherwise be able to perform.

It is extremely important that you provide correct responses to the following questions and that you indicate your qualifications to be able to do the essential functions of the telecommunications position. Failure to answer the questions may indicate that you have not provided the information to qualify you for the present position.

Education: List Grammar, High School, College, Correspondence, Business or Technical Schools attended (Exclude Military Schools).

Name of School	Location City and State	Type	Dates of Attendance	Hours Completed	Graduate Degree

List all specific education honors, scholarships, etc. received:

List all memberships in school societies, fraternities, or clubs. (You may include membership in organizations indicating national origin if you wish):

Have you ever been expelled or suspended from any school or dropped out of school because of poor scholastic standing?

☐ Yes ☐ No

If yes, please explain the circumstances:

Employment

In chronological order, list all Employment Experience for the past ten (10) years including part time:

Dates (From – To)	Employed by (Name of Firm or Agency, Address)		
Title of Position	Salary	Reason for Leaving	Telephone Number
Types of Duties		Name of Supervisor	

Dates (From – To)	Employed by (Name of Firm or Agency, Address)		
Title of Position	Salary	Reason for Leaving	Telephone Number
Types of Duties		Name of Supervisor	

Dates (From – To)	Employed by (Name of Firm or Agency, Address)		
Title of Position	Salary	Reason for Leaving	Telephone Number
Types of Duties		Name of Supervisor	

Dates (From – To)	Employed by (Name of Firm or Agency, Address)		
Title of Position	Salary	Reason for Leaving	Telephone Number
Types of Duties		Name of Supervisor	

Have you have extended work absences for reasons other than earned vacation or illness?
<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain the circumstances:

Have you ever been fired, suspended, or put on an inactive status by any of your previous employers?
<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain the circumstances:

Specialized Training

In chronological order, list all special training received and occupational Schools attended in your employment history. (Exclude military schools and training, high schools, colleges, etc.)

Name of School	Location City and State	Type	Dates of Attendance	Hours Completed	Certificate Received

Selective Services

Have you ever served in any branch of the Selective Service? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>
If yes, please indicate branch, current status, and any military training or experience that would assist you in being a Dispatcher: <div></div>

Base or Name of School	Location City and State	Type	Dates of Attendance	Hours Completed	Certificate Received

List any medals, decorations campaign or theater ribbons awarded to you while in the Armed Forces:

Were you honorably discharged?

(If no, please provide a copy of any discharge papers)

☐ Yes ☐ No

Subversive Affiliations

As used in this application, subversive organization will mean any group or organization which supports or follows or which is sympathetic to the overthrow of the United States, its constitution, etc. or any other groups that does not follow the constitution.

Have you ever by word of mouth, or in writing, advocated, advised or taught the Doctrine that the Government of the United States of America or any political Subdivision thereof should be overthrown by force, violence or any lawful means?

☐ Yes ☐ No

Are you now or have you ever been a member of any subversive organization?

☐ Yes ☐ No

Have you ever subscribed to any subversive magazine or other periodicals?

☐ Yes ☐ No

Have you ever been connected or affiliated in any manner with or have you ever attended any meetings of any subversive organization?

☐ Yes ☐ No

Have you ever paid, collected, or solicited any money, dues or contributions to, for, or on the behalf of any subversive organizations?

☐ Yes ☐ No

If your responses are yes to any of the above questions, please indicate the circumstances:

Have you ever been fingerprinted? If yes, please complete below: <input type="checkbox"/> Yes <input type="checkbox"/> No			
When	Where	For Whom	Purpose

What foreign languages are you familiar with? Indicate whether you are fluent, average, or fair.

Language	Converse	Read	Write

Personal/Social Information

(This information is used to question family members and associates to determine your fitness relative to social responsibilities.)

Name (Father/Mother)	Address	Phone Number

Personal References

Name	Relationship	Address	Phone Number

List any social, labor, civic and fraternal organizations that you have or now belong to which demonstrates your fitness for this position (you may exclude any that is associated with a national origin if you wish):

Which of your previous jobs did you like the best? Explain the duties, the type of supervisor, and other reasons:

Which of your previous jobs did you like the least? Explain the duties and reasons why:

What prior experiences have you had with law enforcement? Explain:

Do you know of any other information that we have not asked for which may come out in the background information concerning your present fitness to handle the essential functions of the Sheriff's Office?

☐ Yes ☐ No

If yes, you have an opportunity to disclose this information. (In this question we are not interested in your physical or mental ability to do the job.

WAIVER

For and in consideration of the Grady County Sheriff's office acceptance and processing of my application for employment, I agree to hold the Grady County Sheriff's office, its agents, and employees harmless from any and all claims and liability associated with my application for employment or in any way connected with the decision whether or not to employ me with the Grady County Sheriff's Office. I understand that should information of a serious criminal nature surface as a result of this investigation, any such information may be turned over to the proper authorities.

I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access and disclosure of records, and I waive those rights with the understanding that information furnished will be used by the Grady County Sheriff's Office in conjunction with the employment procedures.

A photocopy or FAX copy of this release form will be valid as an original thereof, even though the said photocopy or FAX copy does not contain an original writing of my signature.

This waiver is valid for a period of six (6) months from the date of my signature. Should there be any questions as to the validity of this release, you may contact me at the address listed on this form. I agree to pay any and all charges or fees concerning the request and be billed for such charges at the address listed on this form.

I agree to indemnify and hold harmless the person to whom this request is presented and hold harmless his/her agents and employees from any claims, damages, losses, and expenses, including reasonable attorney's fees, arising out of or by complying with this request.

Date: _____

Signature: _____

Typed or Printed: _____

Current Address: _____

Telephone Number: _____
Include Area Code

Subscribed and sworn before me this _____ day of _____, 20____.

Notary Public: _____

My commission expires: _____

WRITTEN EXERCISE

Why are you pursuing a career as a Dispatcher?

What have you done in your past (schooling, extra-curricular activities, including sports, etc., or other training and experience) to prepare you for a career in public safety?

What has been your association or experience with Public Safety personnel?

Date: _____ Signature: _____

AUTHORIZATION TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I am in applicant for a position with the Grady County Sheriff's Office. The office needs to thoroughly investigate my employment background and personal history to evaluate my qualifications to hold the position for which I applied. It is in the public's interest that all relevant information concerning my personal and employment history be disclosed to the above office.

I hereby authorize any representative of the Grady County Sheriff's Office bearing this release to obtain any information in your files pertaining to my employment records and I hereby direct you to release such information on request of the bearer. I do hereby authorize a review of and full disclosure of all records, or any part hereof, concerning myself, by and to any duly authorized agent of the Grady County Sheriff's Office, whether said records are of public, private, or confidential nature. I reiterate and emphasize that the intent of this authorization is to provide full and complete access to the background and history of my personal life, for the specific purpose of pursuing a background investigation that may provide pertinent information for the Grady County Sheriff's Office to consider in determining my suitability for employment in that agency. It is my specific intent to provide access to personnel information however personal or confidential it may appear to be.

I consent to your release of any and all public and private information that you may have concerning me, my work record, my background and reputation, my military service records, educational records, my financial status, my criminal history record, including any arrest records, any information contained in investigatory files, efficiency ratings, complaint or grievances filed by or against me, the records or recollections of attorneys at law, or other counsel, whether representing me or any other person in any case, either criminal or civil, in which I presently have, or have had an interest, attendance records, polygraph examinations, and any internal affairs investigations and discipline, including any files which are deemed to be confidential and/or sealed.

I hereby release you, your organization, and all others from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal laws. I hereby release you, as the custodian of such records of your organization, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, upon request of the duly accredited representative of the Grady County Sheriff's Office regardless of any agreement I may have made with you previously to the contrary. The law enforcement agency requesting the information pursuant to this release will discontinue processing my application if you refuse to disclose the information requested.

Date: _____

Signature: _____

Typed or Printed: _____

Current Address: _____

Telephone Number: _____
Include Area Code

Subscribed and sworn before me this _____ day of _____, 20____.

Notary Public: _____

My commission expires: _____

**OFFICE OF THE SHERIFF
GRADY COUNTY, STATE OF OKLAHOMA**

A thorough investigation will be conducted to determine your qualifications for the position of Dispatcher. To a great extent, your ability to be qualified for employment will depend on information obtained in confidential interviews with persons with the whom you have been associated, including the personal references you have listed.

If the reasons for your non-acceptance are of a temporary nature, whereby you could be accepted at a later date, you will be so notified. Failure to be certified and hired at the present time does not indicate that you cannot apply at a later date but that other candidates provided experience, education and background data that were more suitable for employment.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENT.

Date: _____ Signature: _____
Month/Day/Year

Typed or Printed _____

WITNESS: _____

READ CAREFULLY BEFORE SIGNING

I certify that the facts given in this Application are true and complete to the best of my knowledge. I hereby grant permission to the county to investigate any information included in the application and I agree to submit to a medical examination if required. I understand that this application is not a contract for employment. I hereby release the county and its agents from all liability in making any investigation and inquiry relative to information contained in the application form. I understand, that if employed, false or misleading statements given in this application or interview(s) may result in discharge. I understand that I am required to abide by all rules and regulations of the County.

Date: _____ Signature: _____
Month/Day/Year

WITNESS: _____

JOB DESCRIPTION

DISPATCHER

Definition:

Under general supervision, enforces the laws of the State of Oklahoma and answers calls for service.

Essential Job Functions:

Accurately and efficiently receiving and transmitting information via telephone and through the Computer Aided Dispatch Data Network; input and/or retrieval of information concerning emergency and non-emergency situations; recording information obtained from callers by typing information into the computer via a computer terminal and keyboard; routing calls to appropriate dispatch consoles; monitoring calls to ensure dispatch of support agencies; dispatching emergency and non-emergency vehicles to reported trouble locations; and monitoring frequencies in order to respond to field unit status reports and requests for assistance. The work is reviewed through continual visual observation and through monitoring of radio frequencies by the supervisor.

Job Requirements

- Skill in accurately and efficiently obtaining, recalling, and relaying pertinent information.
- Skill in verbal communications utilizing tact and diplomacy.
- Skill in recording information accurately.
- Skill in operating two-way radios and multi-line telephone systems.
- Skill in making quick and accurate decisions.
- Ability to remain calm in emergency situations.
- Willingness to maintain confidentiality.

Physical Demands

- Arm-hand steadiness and manual/finger dexterity enough to use equipment such as a computer keyboard, telephone, etc.
- Near vision enough to read a computer screen and written communication such as memos, operations procedures, and instructions from supervisors.
- Hearing and speech enough to communicate clearly and distinctly by telephone, radio, and in person in a semi-noisy environment created by other dispatchers, equipment, etc.
- Subject to sitting, telephone usage, etc., for prolonged periods of time.

Working Conditions

- Inside at all times in a climate-controlled environment where temperature remains between 60 degrees and 70 degrees Fahrenheit.
- Exposure to continuous noise at low levels as produced by other dispatch personnel, computer terminals, keyboards, and climate control equipment.
- Subject to frequent stress from high activity levels and the nature of calls received.
- Required to work shifts including nights, weekends, and holidays.
- Subject to shift assignment changes.
- Subject to 24-hour emergency call.