



Jessica Douglas
Director

222 N. 52nd Street
Quincy, Illinois 62305

(217) 228-4572
Fax: 222-9361

Dear Applicant:

Thank you for your interest in employment with the Quincy/Adams County 9-1-1 Center. An application for the 9-1-1 Telecommunicator position is enclosed. Please provide a resume when you return the completed application.

Once we have received your application and resume, we will contact you regarding the testing process for the telecommunicator position.

Employment information is on the back of this letter.

Sincerely,

Jessica Douglas
Director, Quincy/Adams County 9-1-1



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EMPLOYMENT INFORMATION

This position is responsible for the general operations of the 9-1-1 Dispatch Center. Duties include handling incoming telephone calls for service and dispatching a public safety response, using the Computer Aided Dispatch computer system, monitoring radio transmissions, record maintenance and the use of various office equipment.

Requirements: High school diploma or equivalent; Must pass an initial criminal history check.

<u>Wage Scale:</u>	<u>May 1, 2024</u>
Telecommunicator (Probation-2 years)	\$20.20
Telecommunicator I (2-4 years)	\$22.42
Telecommunicator II (4-10 years)	\$24.67
Telecommunicator III (10-15 years)	\$24.96
Telecommunicator IV (15-20 years)	\$25.20
Telecommunicator V (20+ years)	\$25.40

*Shift differentials for evening (\$0.25) and midnight (\$0.50) shifts

Training: Provided and paid for by the employer, includes on-the-job training, various schools and seminars which may require an overnight stay.

Schedule: 40 hours per week, shift work, rotating off days.

Vacation: 10 days after completion of the first year, progresses to 20 days after 13 years of service.

Holidays: 13 paid holidays

Sick Leave: 8 hours earned per month.

Uniforms: Organizational shirts provided by employer.

Overtime: All overtime is paid at time and a half the regular rate of pay.

Pay Period: Paid every other week with 26 pay periods annually. Participate in IMRF (Illinois Municipal Retirement Fund).

Insurance: Health Insurance is provided for the employee by the City of Quincy at a cost sharing of 85% of the premium paid by employer and 15% of the premium paid by the employee beginning the first month after three months of employment. Dependent coverage is available.



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APPLICATION FOR EMPLOYMENT QUINCY/ADAMS COUNTY 9-1-1 COMMUNICATIONS CENTER

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the Director.

PERSONAL INFORMATION

Name (Last) (First) (Middle)

List any other names, aliases you have used, or been known by (including maiden name, if applicable)

Home Address (House No., Street, City, State, Zip Code, and County)

Home Phone Number Date of Birth Social Security Number

Can you prove your U. S. Citizenship? _____ Yes _____ No

If not a U. S. Citizen, give Visa No. and Expiration Date: _____

Position You Are Applying For: _____ Salary Requirement: _____

Referred By: _____ Date You Can Start: _____

Have you previously applied for employment with Quincy/Adams County 9-1-1 Center?

_____ Yes _____ No If yes, what was the approximate date? _____

EDUCATION RECORD

High School (Name, City, State): _____

Graduation Date: _____

Business or Technical School (Name, City, State): _____

Dates Attended: _____ Degree Earned: _____

Undergraduate College (Name, City, State): _____

Dates Attended: _____ Degree, Major: _____

Graduate School (Name, City, State): _____

Dates Attended: _____ Degree, Subject: _____

List any professional license or certificates you hold or have held:

MILITARY SERVICE

Have you ever served in any military organization of the U.S.? ____Yes ____No

If yes, name branch: _____

Entry Date: _____ Discharge Date: _____

Type of Discharge: _____ Current Status: _____

CRIMINAL HISTORY

IMPORTANT NOTICE TO APPLICANTS

Under Illinois law, job applicants are not obligated to disclose sealed or expunged records of conviction or arrest or expunged juvenile records of conviction or arrest.

Have you ever been convicted of a misdemeanor or felony? ____Yes ____No

If yes, give date(s) and nature of violations(s):

Applicants with a felony conviction cannot be considered for employment.

EMPLOYMENT HISTORY

List all jobs you have held for the past five years. Start with your current or most recent job and work backwards. Please include all military service, periods of unemployment and temporary or part-time jobs.

1)

Employer's Name	Address	Phone
Name & Title of Supervisor		From (date) To (date)
Position	Job description	Reason for leaving

2)

Employer's Name	Address	Phone
Name & Title of Supervisor		From (date) To (date)
Position	Job description	Reason for leaving

3)

Employer's Name	Address	Phone
Name & Title of Supervisor		From (date) To (date)
Position	Job description	Reason for leaving

4)

Employer's Name	Address	Phone
Name & Title of Supervisor		From (date) To (date)
Position	Job description	Reason for leaving

5)

Employer's Name	Address	Phone
Name & Title of Supervisor		From (date) To (date)
Position	Job description	Reason for leaving

Explain your reason for applying for this position: _____

REFERENCES

Fill in below the name of **five adults** who have known you for a **period of five years or more**. These five people **should not be relatives or employers** (past or present) and they will be asked to appraise your character, personality, and other qualities.

1)

Name	Address	Home Phone	Years Known
Business Address	Occupation/Profession	Business Phone	

2)

Name	Address	Home Phone	Years Known
Business Address	Occupation/Profession	Business Phone	

3)

Name	Address	Home Phone	Years Known
Business Address	Occupation/Profession	Business Phone	

4)

Name	Address	Home Phone	Years Known
Business Address	Occupation/Profession	Business Phone	

5)

Name	Address	Home Phone	Years Known
Business Address	Occupation/Profession	Business Phone	

PLEASE READ AND SIGN

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I understand that any information provided by me that if found false, incomplete or misrepresented in any respected, will be sufficient cause to(i) cancel further consideration of this application, or(ii) immediately discharge me from the employer’s service, whenever it is discovered. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other person, corporations or organizations for furnishing such information about me.

Signature: _____

Date: _____

AUTHORIZATION

I authorize and empower the Quincy/Adams County 9-1-1 Joint Emergency Telephone System Board, any consumer reporting agency, or other outside service company engaged by said Board for this purpose, now or subsequently to obtain, prepare, use and furnish information concerning my current and former employment, criminal history, education, credit, general reputation, health, personal characteristics and mode of living through correspondence or personal interviews with neighbors, friends, or associates or others with whom I am acquainted or who may have knowledge concerning any of the above items. Upon written request, I understand that said Board will provide me with information regarding the nature and scope of the investigation if one is made.

Signature: _____

Date: _____

CONDITIONS OF EMPLOYMENT

I understand that employment with the Quincy/Adams County 9-1-1 Center will be contingent on a background investigation and my submitting to a physical examination and satisfying the physical requirements for employment that is necessary for performance for the particular job.

Due to the nature of the job that I am applying for drug and alcohol use that interferes with my job is strictly forbidden and I agree to submit to testing if required by my employer for this purpose.

I understand that, if I am employed, I must be free and remain free from any felony convictions.

I understand that employment with the Quincy/Adams County 9-1-1 Center will be contingent on my submitting to a psychological examination and a polygraph test, and satisfying the requirements for employment that is necessary for performance for the particular job.

Signature: _____

Date: _____