



Holbrook Regional Emergency Communications Center

Director Stephan A. Hooke
300 South Franklin Street
Holbrook, MA 02343
Business: 781-767-6461
Fax: 781-767-6888



Regional Public Safety Telecommunicator/Dispatch Job Description

Town of Holbrook, Massachusetts

Definition: Technical, clerical and dispatching work related to the answering of all emergency and non-emergency telephone calls and alarms in support of the regional emergency communications center operations; all other related work as required.

Supervision: Works under the general supervision of the Director. Performs a variety of dispatching and clerical functions in accordance with established standard operating procedures.

Job Environment: Work is performed under typical office conditions, occasionally stressful. Operates computer, operates all dispatching equipment, radio systems, automated data communications systems, fire alarm signaling equipment and telephone systems. Operates standard office equipment such as word processor, copy machine, fax machine, recording units, etc. Has constant contact with other Town, State and Federal offices and officials as well as the general public requiring excellent customer service skills. Errors could be costly with regard to loss and damage of life and property which may result in legal and financial repercussions for the Town.

Essential Functions: The essential functions or duties listed below are intended only as an illustration of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related or a logical assignment to the position.

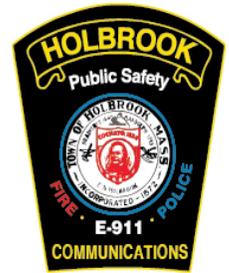
- Receives and records telephone calls and requests for service or information; maintains accurate and timely computer entries regarding documented complaints; receives and transmits radio communications and dispatches fire and other appropriate personnel as required; coordinates back-up support activities via the radio or telephone.
- Obtains all necessary information from the callers or walk-ins that are making complaints, reporting incidents or requesting service if necessary. Transfer all calls for personnel or others who are in house by proper use of telephone intercom system. Takes and relates messages for individuals who are not in the station.
- Dispatches fire, rescue and emergency medical services to calls as may be required.

- Conducts all radio transmissions according to the rules of the Federal Communications Commission and the established procedures of the departments; dispatches all necessary personnel and equipment according to the nature and severity of the incident.
- Maintains constant and diligent monitoring of the systems and immediately responds to all requests for assistance or service from the field units.
- Operates the dispatch computer, responsible for the entry and retrieval capabilities of the computer and the method of operation for each; maintains an up to date log during the course of a shift.
- Becomes familiar with any new data processing procedures and programs which may be utilized.
- Monitors all radio frequencies in the communications center, monitors and maintains all equipment within the communications center including fire signaling alarms, monitors and dispatches appropriate units for all alarms received by this department.
- Answers inquiries from and provides information to the public concerning such things as directions, special events, municipal services, etc. Direct the public to appropriate sources of information and appropriate personnel.
- Maintains fire incident reporting of computer aided dispatching systems. Provides assistance and guidance to the general public who “walk in” the station with a variety of routine information, assistance and resolves minor problems and complaints as needed.
- Continuously updates standard operating procedures to ensure proper procedures are accurate, up to date and in place.
- Maintain all certifications, licenses and professional associations in order to keep abreast of current dispatching trends and procedures. Including but not limited to APCO Public Safety Dispatching, APCO Emergency Medical Dispatching and 911 training.
- Maintains all departmental logs and records related to dispatching for fire.
- Performs similar or related work as required or as situation dictates.
- (This job description does not constitute an employment agreement between the employer and employee and is subject to change by the employer as the needs of the employer and requirements of the job change.



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Application for Employment

Regional Emergency Communications Center

1. These forms must be typewritten or printed in blue or black ink by the applicant himself/herself.
2. All questions must be answered, if applicable. If not applicable, indicate N/A.
3. Failure to answer any and all questions truthfully, accurately or completely shall result in the applicant's disqualification or if discovered after an individual is hired, termination from employment.
4. If the space provided is not sufficient to complete answers, or you wish to make additional comments, attach paper the same size as these forms and indicate to which question those sheets pertain to.
5. You are applying for a responsible public safety position. It is essential that you follow instructions specifically as directed. Make sure all dates and information are absolutely correct.

I have read and understood the above instructions.

Applicant: _____

Date: _____

This application will be held on file for a period of _____ year

Date received: _____

Release of Information Agreement

TO WHOM IT MAY CONCERN: I am an applicant for a position as a permanent full time Emergency Telecommunicator with the Town of Holbrook. The Town of Holbrook needs to thoroughly investigate my employment background and personal history to evaluate my qualifications to hold the position for which I have applied. It is in the public's interest that all relevant information concerning my personal and employment history be disclosed to the Town of Holbrook.

I hereby authorize any representative of the Town of Holbrook bearing this release to obtain any information in your files pertaining to my employment records and I hereby direct you to release such information upon request of the bearer, I do hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of the Town of Holbrook, whether said records are of public, private, medical, or confidential nature. The intent of this authorization is to give my consent for full and complete disclosure. I reiterate and emphasize that the intent of the authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation that may provide pertinent data for the Town of Holbrook to consider in determining my suitability for employment in that department. It is my specific intent to provide access to personnel information, however personal or confidential it may be.

I consent to your release of any and all public information that you may have concerning me, my work record, my background and reputation, my military records, financial status, my criminal history record including any arrest records. Any information contained in investigation files, efficiency rating, complaints or grievances filed by or against me. The records or recollections of attorneys at law, or other counsel, whether representing me or another 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 damage 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, or any attempt to comply with it. I direct you to release such information upon request to the duty accredited representative of the Town of Holbrook regardless of any agreement I have made with you previously to the contrary. The public safety

organization requesting the information pursuant to this release will discontinue processing my application if I refuse to disclose the information requested.

For consideration of the Town of Holbrook's acceptance and processing of my application for employment, I agree to hold the Town of Holbrook, 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 Town of Holbrook. I understand that should information of a serious criminal nature surface as a result of this investigation, such information may be turned over to the proper authorities.

I understand my rights under Title 5, United States Code 552a, the Privacy Act of 1974, with regard to access and to disclosure of records, and I have waived those rights with the understanding that information furnished will be used by the Town of Holbrook in conjunction with employment procedures.

A photocopy or fax 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 sixty (60) days from the date of my signature.

Should there be any question as to the validity of this release, you may contact me at the address listed on this form.

I agree to indemnify and hold harmless the person to whom this request is presented and its agents and employees, from and against all claims, damages, losses and expenses including reasonable attorney fees arising out of or by reason of complying with this request.

Full Name:	
Full Address:	
Telephone Number:	
Date of Birth:	
Social Security Number:	

Commonwealth of Massachusetts

_____ County

Then personally appeared the above-named _____ and acknowledge the foregoing instrument to be his/her free act and deed, before me this _____ day of _____ 20__.

_____ Notary Public

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781-7672234

Application for Employment – Telecommunicator

Date: _____ Social Security # _____

Name: _____ DOB _____

Address: _____

How long have you resided at this address: _____

Phone Number _____ Cell phone: _____

Driver's License No. _____ Expiration _____ Class _____

Any Restrictions: _____

Father's Name: _____ Mother's Maiden Name: _____

Are you a U.S. Citizen? Y ___ N ___ Naturalized _____

Marital Status: Married: _____ Divorced: _____ Single: _____ Other: _____

Spouse's Name: _____

Military Status: Veteran Y ___ N ___ Branch of Service _____

Honorable Discharge Y ___ N ___

Education: Grammar School: _____

High School: _____ Year Graduated _____

College: _____ Year Graduated _____

Course currently studying: _____

Certifications:

NG911 _____ CPR Certified _____ APCO Emergency Medical Dispatch _____

APCO Public Safety Telecommunicator _____ Other _____

Special education, training or experiences that you think may be helpful to this position:

Have you ever been employed by the Town of Holbrook? _____Y _____N

If yes, please indicate department and for how long. _____

Are you interested in: Full Time _____ Part Time: _____ Either: _____



Present Employer _____

Occupation: _____ How Long: _____

Address: _____ Telephone No. _____

Prior Work Experience Beginning with Most Recent:

Employer: _____ **Address** _____

Telephone No. _____ **Occupation:** _____

Years/Dates of Service _____ **Managers Name** _____

Employer: _____ **Address** _____

Telephone No. _____ **Occupation:** _____

Years/Dates of Service _____ **Managers Name:** _____

Employer: _____ **Address** _____

Telephone No. _____ **Occupation:** _____

Years/Dates of Service _____ **Managers Name:** _____

References:

Name: _____ Telephone No. _____

Address: _____ **Years acquainted** _____

Association: _____

Name: _____ Telephone No. _____

Address: _____ **Years acquainted** _____

Association: _____

Name: _____ Telephone No. _____

Address: _____ **Years acquainted** _____

Association: _____

Do you now, or have you ever, had any problems with alcohol? Y _____ N _____

Do you now, or have you ever, had any type of a drug problem? Y _____ N _____

Do you have any type of disciplinary or legal action pending? Y _____ N _____

I hereby state that the facts on this and preceding pages of this application were in fact given by myself under the pains and penalties of perjury.

Applicants Signature

Date of Interview: _____ Time of Interview _____

Notes:
