



City and Borough of Sitka

An Equal Opportunity Employer
 100 Lincoln St. Sitka, AK 99835
 Phone No. (907)747-1816 Fax No. (907)747-1846

**Dispatch & Records Clerk
 Applicant Information**

email: hr@cityofsitka.org

GENERAL INSTRUCTIONS: Every question must be answered to qualify for the position of Dispatch & Records Clerk and ability to work at the Sitka Police Department. If the question does not apply to you, respond with N/A. Do not leave any space blank. If space available is insufficient to provide a complete answer, attach a separate sheet of paper and precede each answer with the number of the referenced question. Do not misrepresent or omit a requested fact or item. The statements made herein are subject to verification to determine your qualifications and security background checks. This application is treated as a written test. Failure to follow directions may result in disqualification from the process.

1. Last Name	First Name	Middle Name	Male <input type="checkbox"/>	Female <input type="checkbox"/>
2. Other Names, Alias(es), Nicknames:				
3. Residence Address	Street	City	State	Zip Code
4. Mailing Address	Street	City	State	Zip Code
5. Residence Phone Number	Cell Phone Number	Email		

We appreciate the time you spend completing this application. The employer, in accordance with state and federal laws, does not discriminate on the basis of age, race, religion, color, sex, national origin, ancestry, mental or physical disability, veteran status, citizenship, or any other protected classification.

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 Human Resources at (907) 747-1816.

6. If you are 18 years of age or older?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Are you prevented from lawfully becoming employed in this country because of your Visa or Immigration Status? <i>Proof of citizenship or immigration status will be required upon employment.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8. Do you have a valid Alaska Driver's License? <i>If yes, please provide number:</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9. Date available to work:		
10. This position requires shift work including nights, weekends, holidays and overtime. Are you willing to work those schedules established by the City and Borough of Sitka Police Department?	<i>Evenings</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<i>Nights</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<i>Weekends</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<i>Holidays</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Education			
High School			
<i>Name and Address of School</i>	<i>Course of Study</i>	<i>Years Completed</i>	<i>Diploma Degree</i>
Undergraduate College			
<i>Name and Address of School</i>	<i>Course of Study</i>	<i>Years Completed</i>	<i>Diploma Degree</i>
Graduate Professional			
<i>Name and Address of School</i>	<i>Course of Study</i>	<i>Years Completed</i>	<i>Diploma Degree</i>
Others (specify)			
<i>Name and Address of School</i>	<i>Course of Study</i>	<i>Years Completed</i>	<i>Diploma Degree</i>

Employment History		
Most Recent Employer		Address
		Phone Number
Date Started	Starting Salary Per	Starting Position
	\$	
Date Left	Salary on Leaving Per	Position on Leaving
	\$	
Name and Title of Supervisor		Reason for Leaving
Duties/Responsibilities		
May we contact your present employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer			Address		Phone Number
Date Started			Starting Salary Per		Starting Position
			\$		
Date Left			Salary on Leaving Per		Position on Leaving
			\$		
Name and Title of Supervisor				Reason for Leaving	
Duties/Responsibilities					
Employer			Address		Phone Number
Date Started			Starting Salary Per		Starting Position
			\$		
Date Left			Salary on Leaving Per		Position on Leaving
			\$		
Name and Title of Supervisor				Reason for Leaving	
Duties/Responsibilities					

Employment History (cont.)					
Most Recent Employer			Address		Phone Number
Date Started			Starting Salary Per		Starting Position
			\$		
Date Left			Salary on Leaving Per		Position on Leaving
			\$		
Name and Title of Supervisor				Reason for Leaving	
Duties/Responsibilities					
May we contact your present employer?			<input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer			Address		Phone Number
Date Started	Starting Salary Per	Starting Position			
	\$				
Date Left	Salary on Leaving Per	Position on Leaving			
	\$				
Name and Title of Supervisor			Reason for Leaving		
Duties/Responsibilities					
Employer			Address		Phone Number
Date Started	Starting Salary Per	Starting Position			
	\$				
Date Left	Salary on Leaving Per	Position on Leaving			
	\$				
Name and Title of Supervisor			Reason for Leaving		
Duties/Responsibilities					

Include explanation of any gaps in employment.

Other Qualifications
Describe any specialized training, apprenticeship, skills and extra-curricular activities.
Describe any job-related training received in the United States military.
List professional, trade, business, or civic activities and offices held.

List professional, trade or business licenses held.

References Do not include family members or past supervisors.		
Name	Phone Number	Occupation

DUE TO THE NATURE AND SECURITY OF POSITIONS WITH SITKA POLICE DEPARTMENT, ADDITIONAL INFORMATION IS NECESSARY. **INFORMATION SUBMITTED FOR THIS PORTION OF THE APPLICATION WILL BE KEPT CONFIDENTIAL.**

ADDITIONAL INFORMATION – FAMILY or SIGNIFICANT OTHER
Name of Spouse or Significant Other (Including anyone you are currently dating) - include date married (if applicable), spouse’s or significant other’s date of birth and occupation:
Name of children, including stepchildren and adopted, regardless with whom they reside – include date of birth:

Additional Information – ARREST, DETENTION AND LITIGATION (show all arrests including traffic, except parking)		
<p>Criminal Convictions: A criminal conviction, including non-judicial punishment issued during military service by a military tribunal, military administrative agency, or by a commanding officer, for offenses comparable to violations of federal, state, and local criminal laws, will not always constitute grounds for disqualification. The type and number of charges for which an applicant was convicted, date of the conviction(s), as well as the relationship to the applied for position will be evaluated. Additionally, if you check “yes” and do not give a complete and accurate explanation of your conviction(s), your application will not be considered for the position.</p> <p><i>If yes to any of the questions below, you must explain on a separate piece of paper and attach it to this application, even if you received suspended imposition of a sentence. Conviction will not necessarily disqualify an applicant from employment.</i></p>		
a. Were you ever a subject of a criminal investigation, issued a summons, detained or arrested by a law enforcement agency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. Have you been convicted of a crime?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. Have you ever been fingerprinted for any reason (arrest, job, application, etc.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d. Have you been convicted of a misdemeanor or any crime related to domestic violence? A MISDEMEANOR CRIME OF DOMESTIC VIOLENCE MEANS AN OFFENSE THAT: 1) IS A MISDEMEANOR OR FELONY UNDER FEDERAL OR STATE LAW; AND 2) HAS, AS AN ELEMENT, THE USE OR ATTEMPTED USE OF PHYSICAL FORCE, OR THE THREATENED USE OF A DEADLY WEAPON, COMMITTED BY A FORMER SPOUSE, PARENT, OR GUARDIAN OF THE VICTIM, BY A PERSON WITH WHOM THE VICTIM SHARES A CHILD IN COMMON, BY A PERSON WHO IS COHABITING WITH THE VICTIM AS A SPOUSE, PARENT, OR A GUARDIAN, OR BY A PERSON SIMILARLY SITUATED TO A SPOUSE, PARENT, OR GUARDIAN OF THE VICTIM.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e. Have you been convicted of a felony?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
f. ILLICIT/ILLEGAL DRUG USE: Do you now use, or have you ever used, illicit (illegal) drugs? (This includes marijuana, synthetic and/or pseudo drugs, and any use of another person’s prescription medication at any time for any reason?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

NOTE TO APPLICANTS

DO NOT ANSWER THE FOLLOWING QUESTION UNLESS YOU HAVE REVIEWED THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING. PLEASE SEE JOB DESCRIPTION.

Are you capable of performing in a reasonable manner, with or without reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

Yes No

APPLICANT AUTHORIZATION AND CERTIFICATION – I AUTHORIZE the City and Borough of Sitka (CBS) to obtain any information relating to the facts provided in this application from schools, employers, criminal justice agencies, individuals, ETC. This information may include, but is not limited to, academic, performance, attendance, achievement, personal history, disciplinary, arrest, and conviction records. **I DIRECT** you to release such information to the CBS regardless of any agreement I may have made with you previously to the contrary. **I RELEASE** any employer, including individuals such as records custodians, from any and all liability for damages of whatever kind of nature which may at any time result on account of compliance, or any attempts to comply with this authorization.

I CERTIFY that the statements contained herein are true to the best of my knowledge. I understand that any incomplete, inaccurate, misleading, false or incorrect information may result in rejection of my application, disqualification from consideration, may render an appointment void and/or can be cause for my dismissal upon discovery.

I AGREE to submit to such tests and physical and/or mental examinations as the CBS may require.

For e-mail submissions only: By submitting this form the applicant certifies that the information contained in the documents is correct and acknowledges that the applicant will be required to sign the form to re-confirm that certification prior to interviewing for any position.

Signature

Date

**City and Borough of Sitka
Equal Employment Opportunity Survey**

Last Name	First Name	Middle Name
Position Applied For		Social Security Number

To All Applicants

The information requested on this page is necessary for the City and Borough of Sitka to comply with the regulations of Alaska State Commission for Human Rights. This information will not be seen by the hiring board for any jobs that you are applying for, it will be kept confidential and be available only to Federal and State personnel legally charged with administering Civil Rights Laws and Regulations. However, statistical information compiled from records on age, sex and race shall be made available to the public.

AGE INFORMATION	
Your Age	Date of Birth

RACE, ETHNICITY AND GENDER INFORMATION

	Female	Male
Alaskan Native	<input type="checkbox"/>	<input type="checkbox"/>
American Indian	<input type="checkbox"/>	<input type="checkbox"/>
Asian or Pacific Islander	<input type="checkbox"/>	<input type="checkbox"/>
Black	<input type="checkbox"/>	<input type="checkbox"/>
Hispanic	<input type="checkbox"/>	<input type="checkbox"/>
White	<input type="checkbox"/>	<input type="checkbox"/>
Mixed	<input type="checkbox"/>	<input type="checkbox"/>

Definitions of Racial/Ethnic Groups

The racial/ethnic groups for Federal and State reporting purposes are defined as follows:

Alaskan Native~ A person having origins in any of the original peoples of Alaska and who maintains cultural identification through tribal affiliation or community recognition. Alaskan Native may include, for example, any person of Yup'ik, Inupiat, Aleut, Athabascan, Tlingit, Haida or Tsimshian origin.

American Indian~ A person having origins in any of the original peoples of North America (not including Alaska) and who maintains cultural identification through tribal affiliation or community recognition.

Asian or Pacific Islander~ A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

Black~ A person having origins in any of the Black racial groups of Africa (not of Hispanic origin).

Hispanic~ A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

White~ A person having origins on any of the original people of Europe, North Africa or the Middle East (not of Hispanic origin).

Mixed~ A person whose parents or ancestors are from two or more ethnic backgrounds described in this section.