

City of Covington



Public Safety Applicant Background Booklet



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2194 Emory Street • Post Office Box 1527 • Covington, GA 30015-1527
Telephone (770) 385-2000 • Fax (770) 385-2060

Dear Applicant,

Thank you for your interest in a position with the City of Covington. We are extremely proud of our public safety agencies! All three are internationally accredited agencies (Police Department since 1985, Fire Department since 2003 and 911 Center since 2006). All applicants for any position with any of these agencies are required to successfully complete an intensive background investigation. This booklet contains numerous release forms and questionnaires, which must be properly completed so the background investigation can begin. Instructions are clear. You must be completely truthful in all your answers. If it is determined that you have been untruthful in your answers, other than minor omissions, you will be disqualified from continuing in the process. *The selection process may take up to three (3) months from the date of application.*

The employment process is time consuming and requires many hours of background investigation. If you fail to complete the required forms and/or fail to supply the proper documents such as birth certificate, diplomas, etc., you will be removed from the process. Therefore, in order to give every applicant the best opportunity for employment, the background investigator will not begin an investigation on an applicant until all forms and documents are returned to the Human Resources Department. If you do not understand something, please ask the background investigator or the Human Resources Department for clarification. Good luck!

Sincerely,

Steve Horton

Steve Horton
City Manager

Instructions
(Read carefully before proceeding)

These instructions are provided as a guide to assist you in properly completing your Background Booklet. It is essential that the information be accurate in all respects. It will be used as the basis for a background investigation that will determine your eligibility for employment.

1. Make sure your booklet is **legibly printed in ink or typed**.
2. Answer all questions to the best of your ability. If a question is not applicable to you, enter **N/A** in the space provided.
3. **Read all section directions carefully** before making any entries on the form. Be sure your information is correct and in the proper sequence.
4. **You are responsible** for obtaining accurate contact information (addresses and/or phone numbers). If you are not sure of an address or phone number, check it by personal verification. Your local library may have a directory service or copies of local phone directories.
5. An accurate, thorough, and complete form will help expedite your investigation. **Deliberate omissions or falsifications will result in disqualification.**
6. If there is insufficient space on the form for you to include all information required, attach extra sheets to the booklet. Reference the relevant section and question number before continuing your answer.
7. As you complete the questionnaire, if you are uncertain about how to answer a particular question, answer the question to the best of your ability and attach a statement regarding the question(s) and the problems you may have had in answering the question(s).
8. **Take the necessary time to be accurate and truthful.** Do not be afraid to answer questions that may involve criminal sanctions, such as smoking marijuana, as no criminal charge can be filed from this questionnaire. In addition, your answers to this questionnaire will not necessarily disqualify you from the position you seek.
9. The **confidentiality of background information** is strict and can be shared with only the top administrators of the public safety agency you are applying to: Covington Police Department, Covington Fire Department or Covington – Newton County 9-1-1 Communications Center.
10. If you have any questions regarding the questionnaire or the background investigation, please contact the Human Resources Department at (770) 385-2025.
11. Complete background investigations are kept in a locked cabinet and/or secure facility to ensure confidentiality.
12. You **must submit a three (3) year driver's history**, when you submit your application and background booklet. If the driver's history is not turned in at the time of application, your application will be disqualified.
13. **Return this Background Booklet in person** to City of Covington, City Hall along with your application during regular business hours (8 AM – 5 PM, M-F) or via US Mail to City of Covington, Human Resources Department 2194 Emory Street NW Covington, GA 30014.
14. **Do not fax or email your background booklet.**



**City of Covington
Public Safety
AUTHORIZATION TO RELEASE INFORMATION**

Applicant Name: _____
(first, middle, last)

Applicant Date of Birth: _____
(month/day/year)

Applicant Identifier: _____
(Social Security Number)

I, _____, hereby authorize the review and full disclosure of all records and information concerning myself, including any partial records, whether said records are public, private, or confidential in nature. This authorization is explicitly granted to **any duly authorized agent of the Covington Police Department, the Covington Fire Department and/or Covington – Newton County 9-1-1 Communications Center including authorized contract agents working for these agencies.**

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; employment and pre-employment records, including background reports, efficiency ratings, performance evaluations, complaints or grievances filed by or against me, and salary records; records of complaint, arrest, trial, and/or convictions for alleged or actual violations of law, including criminal, civil, and/or traffic records; and/or records of complaints of a civil nature made by or against me, wherever located.

Additionally, I also authorize and consent to a complete and full disclosure of Internal Affairs records (or other internal disciplinary records regardless of their title) including, but not limited to, Internal Affairs complaints, investigations, findings, records of disciplinary action, and disciplinary hearings. I hereby authorize the full and complete disclosure of these records whether they are unsealed, sealed, purged, or otherwise confidential due to previous agreements between me and the entity holding the records.

I reiterate and emphasize that the intent of this 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, which may provide pertinent data for the Covington Police Department, Covington Fire Department, and/or Covington – Newton County 9-1-1 Communications Center to consider in determining my suitability for employment by that agency. It is my specific intent to provide access to personal information, including all personnel files and documents and the sources of information specifically identified herein.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment. I understand that all materials and documents pertaining to this background investigation become the property of The City of Covington, and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims, damages, losses, and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. I further understand that in the event of my application is disapproved; the sources of confidential information cannot be revealed to me.

A photocopy of this release form will be valid as an original, hereof, even though the photocopy does not contain an original writing of my signature.

Applicant Signature _____

Date: _____

Must be signed in the presence of a Notary:

Subscribed and sworn before me this	
_____ day of _____	20 _____
My commission expires _____	20 _____
Notary: _____	

**City of Covington
Public Safety
Personal History Statement**

Part I – Applicant Identification

1. Full Name				
	First	Middle	Last	

2. Other Names Used <small>(E.g. maiden name, married name (s), changes for adoption or other legal name change, any pseudonym, alias, etc.)</small>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: right;">a)</td> <td style="border-bottom: 1px solid black; width: 45%;"></td> <td style="border-bottom: 1px solid black; width: 45%;"></td> </tr> <tr> <td>b)</td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>c)</td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>d)</td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>	a)			b)			c)			d)			Dates when these names were used: <small>(e.g. From 1989 to 1994; from 1997 to present)</small>
a)														
b)														
c)														
d)														

3. Nicknames Used <small>(e.g. Robert, Rob, Bob, Bobby, Bubba, Slick, etc.)</small>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: right;">a)</td> <td style="border-bottom: 1px solid black; width: 45%;"></td> <td style="width: 5%;"></td> <td style="width: 5%; text-align: right;">d)</td> <td style="border-bottom: 1px solid black; width: 40%;"></td> </tr> <tr> <td>b)</td> <td style="border-bottom: 1px solid black;"></td> <td></td> <td>e)</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>c)</td> <td style="border-bottom: 1px solid black;"></td> <td></td> <td>f)</td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>	a)			d)		b)			e)		c)			f)	
a)			d)													
b)			e)													
c)			f)													

4. Height _____	6. Eye Color _____
5. Weight _____	7. Hair Color _____

8. Describe any Scars, Marks & Tattoos:	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: right;">a)</td> <td style="border-bottom: 1px solid black; width: 45%;"></td> <td style="width: 5%;"></td> <td style="width: 5%; text-align: right;">Location on Body:</td> <td style="border-bottom: 1px solid black; width: 40%;"></td> </tr> <tr> <td>b)</td> <td style="border-bottom: 1px solid black;"></td> <td></td> <td></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>c)</td> <td style="border-bottom: 1px solid black;"></td> <td></td> <td></td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>	a)			Location on Body:		b)					c)				
a)			Location on Body:													
b)																
c)																

9. Date of Birth _____ <small>Month/Day/Year</small>	12. City of Birth _____
10. Social Security # _____	13. State of Birth _____
11. State SSN Issued _____	14. County of Birth _____

Part I – Applicant Identification Continued

15. Are you a Citizen of the United States? Yes No
16. Are You: Natural Born (Provide a copy of your Birth Certificate)
- Naturalized (Provide original Naturalization Papers Resident)
- Alien (Provide Alien Registration Card)

Part II – Marital/Family Data

1. Marital Status: Single Married Divorced Separated

2. If married, what is the full name of your spouse (Include maiden name)?

First Middle Last

3. If married, are you living with your spouse? Yes No

If no, please explain: _____

4. List the following information about your current and former spouses:

Name of Spouse	Address of Spouse	Date of Marriage	Location of Marriage	Date of Divorce	Location of Divorce

Part III – Contact Information (Phone)

1. List the phone numbers where you can be reached.

a) Home Phone _____

b) Cell Phone _____

c) Work Phone* _____

(Area Code) Phone Number

*Is it okay to contact you at this number?

Yes No

d) Other Phone _____

Part III – Contact Information Continued

2. In Case of Emergency?			
Name	Phone Number	Address	Relationship
a)			
b)			

Part IV – Residences. Beginning with your current address, list all addresses where you have lived during the past 10 years and the dates you lived there (e.g. Aug 2003-Jan 2005). Attach extra pages if necessary.

1. Current Address				
From:	Street (Apt #)	City	State	Zip
To:				

Prior Address(es)

2. From:				
To:	Street (Apt #)	City	State	Zip
3. From:				
To:	Street (Apt #)	City	State	Zip
4. From:				
To:	Street (Apt #)	City	State	Zip
5. From:				
To:	Street (Apt #)	City	State	Zip
6. From:				
To:	Street (Apt #)	City	State	Zip
7. From:				
To:	Street (Apt #)	City	State	Zip
8. From:				
To:	Street (Apt #)	City	State	Zip

Part V – Educational History

<p>1. Did you receive: a) High School Diploma <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>a) High School(s) Attended _____</p> <p>b) Dates Attended _____</p>	<p>b) GED Certification <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>c) City/State _____</p> <p>d) Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
---	---

University/College: *List all colleges and/or universities you attended.*

<p>2. University or College attended _____</p> <p>City/State: _____</p> <p>Degree received: _____</p> <p>(e.g. AA, BS, MBA)</p> <p>Major/Minor: _____</p> <p>Dates Attended: _____</p>	<p>3. University or College attended _____</p> <p>City/State: _____</p> <p>Degree received: _____</p> <p>(e.g. AA, BS, MBA)</p> <p>Major/Minor: _____</p> <p>Dates Attended: _____</p>
--	--

University/College: *List all colleges and/or universities you attended.*

<p>4. University or College attended _____</p> <p>City/State: _____</p> <p>Degree received: _____</p> <p>(e.g. AA, BS, MBA)</p> <p>Major/Minor: _____</p> <p>Dates Attended: _____</p>	<p>5. University or College attended _____</p> <p>City/State: _____</p> <p>Degree received: _____</p> <p>(e.g. AA, BS, MBA)</p> <p>Major/Minor: _____</p> <p>Dates Attended: _____</p>
--	--

Other Schools: *List other schools attended (trade, vocational, business, etc.) including any pertinent information...*

<p>5. Name of School _____</p> <p>City/State: _____</p> <p>Certificates: _____</p> <p>Course of Study: _____</p> <p>Dates Attended: _____</p>	<p>6. Name of School _____</p> <p>City/State: _____</p> <p>Licenses: _____</p> <p>Course of Study: _____</p> <p>Dates Attended: _____</p>
---	---

Special Qualifications & Skills

8. List any special licenses or permits you hold, such as pilot license, radio operator, scuba, etc., showing licensing authority, original date of issue and date of expiration: _____

9. List any special certifications you hold, such as CPR, First Aid, Radar/Laser showing certifying agency and state, original date of issue and date of expiration: _____

10. List any specialized machinery, equipment, or technology that you are qualified to operate:

11. Foreign Languages: *If you are fluent in a foreign language, indicate your degree of fluency (excellent, good, fair)*

Language	(Indicate fluency)	Speaking	Understanding	Reading	Writing
----------	--------------------	----------	---------------	---------	---------

a)	_____	_____	_____	_____	_____
----	-------	-------	-------	-------	-------

b)	_____	_____	_____	_____	_____
----	-------	-------	-------	-------	-------

c)	_____	_____	_____	_____	_____
----	-------	-------	-------	-------	-------

Part VI – Military Service

1. Have you ever attempted to enlist in any branch of the United States Armed Forces? (Including Reserves, National Guard and/or Coast Guard) Yes No

If "yes," please explain: _____

2. Have you ever served in any branch of a Foreign Military? Yes No

If "yes," please explain: _____

3. Have you ever been involved in a subversive act against the United States Government, or any other government, such as mutiny, treason, sabotage, espionage, etc.? Yes No

If "yes," please explain: _____

Part VI – Military Service Continued

4. Have you ever served in the any branch of the United States Armed Forces? Yes No

If “yes,” please supply the following information:

Branch of Service:	_____	Service ID Number:	_____
Dates of Service:	_____	(To)	_____
(From)	_____		
Type of Discharge:	_____	Military Job Description:	_____
Highest Rank Held	_____	Military Occupation	_____
		Specialty (MOS)	_____
		<i>If Applicable</i>	_____

Past commanding officers or military acquaintances can be sources of relevant information about your background. List the individuals from your military career who know you well enough to provide accurate information about you.

5. Name	_____	6. Name	_____
Contact Phone:	_____	Contact Phone:	_____
Address:	_____	Address:	_____
City, State, Zip	_____	City, State, Zip	_____
Years Known:	_____	Years Known:	_____
(e.g. 1987 to 1999)	_____	(e.g. 1987 to 1999)	_____

7. Have you served in an **additional** branch of the United States Armed Forces? Yes No

If “yes,” please supply the following information:

Branch of Service:	_____	Service ID Number:	_____
Dates of Service:	_____	(To)	_____
(From)	_____		
Type of Discharge:	_____	Military Job Description:	_____
Highest Rank Held	_____	Military Occupation	_____
		Specialty (MOS)	_____
		<i>If Applicable</i>	_____

Past commanding officers or military acquaintances can be sources of relevant information about your background. List the individuals from your military career who know you well enough to provide accurate information about you.

8. Name	_____	9. Name	_____
Contact Phone:	_____	Contact Phone:	_____
Address:	_____	Address:	_____
City, State, Zip	_____	City, State, Zip	_____
Years Known:	_____	Years Known:	_____
(e.g. 1987 to 1999)	_____	(e.g. 1987 to 1999)	_____

Part VII – Personal References. List five persons who know you well enough to provide current information about you. **DO NOT list relatives or former employers.**

1.	Name _____	Home Phone: _____	
	Address _____	Cell Phone _____	
	City, State, Zip _____	When and how did you meet this person? _____	

2.	Name _____	Home Phone: _____	
	Address _____	Cell Phone _____	
	City, State, Zip _____	When and how did you meet this person? _____	

3.	Name _____	Home Phone: _____	
	Address _____	Cell Phone _____	
	City, State, Zip _____	When and how did you meet this person? _____	

4.	Name _____	Home Phone: _____	
	Address _____	Cell Phone _____	
	City, State, Zip _____	When and how did you meet this person? _____	

5.	Name _____	Home Phone: _____	
	Address _____	Cell Phone _____	
	City, State, Zip _____	When and how did you meet this person? _____	

Part VIII – Work History

Beginning with your current/most recent job, **list all employment since age 16.** Include part-time, temporary, and seasonal jobs. **Include all periods of unemployment.** Attach extra pages...

<p>1. Current/Most Recent Job</p> <p>From: _____</p> <p>To: _____</p>	<p>Employer/Company Name: _____</p> <p>Job Title (& Duties): _____</p>
<p>Address you work(ed) at: _____</p>	<p>Phone Number: _____</p>
<p>Note: Include address, city, and state</p> <p>Supervisor Name: _____ (First and Last Name)</p> <p>Coworker Name: _____ (First and Last Name)</p>	<p>Reason for Leaving _____ _____ _____</p>

Part VIII – Work History Continued
Previous Job(s)

2. <i>From:</i>	Employer/Company Name: _____	
<i>To:</i>	Job Title (& Duties): _____	
Address you work(ed) at:	_____	Phone Number: _____
Note: Include address, city, and state	_____	
Supervisor Name: (First and Last Name)	_____	Reason for Leaving _____
Coworker Name: (First and Last Name)	_____	_____

3. <i>From:</i>	Employer/Company Name: _____	
<i>To:</i>	Job Title (& Duties): _____	
Address you work(ed) at:	_____	Phone Number: _____
Note: Include address, city, and state	_____	
Supervisor Name: (First and Last Name)	_____	Reason for Leaving _____
Coworker Name (First and Last Name)	_____	_____

4. <i>From:</i>	Employer/Company Name: _____	
<i>To:</i>	Job Title (& Duties): _____	
Address you work(ed) at:	_____	Phone Number: _____
Note: Include address, city, and state	_____	
Supervisor Name: (First and Last Name)	_____	Reason for Leaving _____
Coworker Name: (First and Last Name)	_____	_____

Part VIII – Work History Continued

5. <i>From:</i>	Employer/Company Name:
<i>To:</i>	Job Title (& Duties):
Address you work(ed) at:	Phone Number:
Note: Include address, city, and state	
Supervisor Name: <i>(First and Last Name)</i>	Reason for Leaving
Coworker Name: <i>(First and Last Name)</i>	

6. <i>From:</i>	Employer/Company Name:
<i>To:</i>	Job Title (& Duties):
Address you work(ed) at:	Phone Number:
Note: Include address, city, and state	
Supervisor Name: <i>(First and Last Name)</i>	Reason for Leaving
Coworker Name: <i>(First and Last Name)</i>	

(Attach extra copies of this page if necessary to provide a complete work history)

Please answer the following questions relating to your work history.

7. Have you ever been terminated, forced to resign or otherwise involuntarily separated by a previous employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____ _____ _____
--

8. Have you ever been reprimanded by a supervisor for misconduct or for not doing your job properly? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____ _____ _____

9. Have you ever been reprimanded for being late or absent? Yes No

If yes, please explain: _____

10. Have you ever been disciplined by a supervisor (including verbal or written reprimands, suspensions, fines, etc.)

Yes No

If yes, please explain: _____

11. Have you ever left a job without giving a two weeks notice? Yes No

If yes, please explain: _____

12. Have you ever been engaged in any business as an owner, partner, or corporate member? Yes No

If yes, please explain: _____

13. Have you ever taken anything of value, goods, or services from an employer without their permission?

Yes No

If yes, please explain: _____

14. Have you ever taken any cash money from an employer? Yes No

If yes, please explain: _____

Part VIII – Work History Continued

15. Figure out a dollar amount of how much you have taken from all employers combined during the last five years and circle the amount below that comes closest to the total dollars in merchandise, goods, or services you have taken. This may include, but is not limited to paper, pens, clips, etc.

\$0 \$10 \$25 \$50 \$70 \$100 \$200 \$500 \$750 \$1000 \$2500 \$5000

Other Amount: _____

Please explain any amounts:

If more room is needed continue on the back of this page.

16. In the last five years, have you submitted an application for employment with any other public safety agency or department? Yes No

If yes, please provide the following information:

Agency	Date Applied	Disposition of Application

17. Have you ever taken a voice stress analysis/polygraph examination for any reason? Yes No

If yes, please provide the following information:

Date	Agency/Company	City/State	Reason Tested	Result

18. Have you ever been rejected for cause from a public safety job? Yes No

If yes, please explain fully. Be specific: _____

19. At the present time, do you have any pending applications with any other public safety agency?

Yes No

If yes, please list the agency, the position applied for and the current status: _____

Part VIII – Arrests, Detention, and Litigation

1. Have you ever been involved as a party in a civil litigation(s)? Yes No

If "yes," please give details:

2. Have you ever been arrested, detained by police, or summoned into court? Yes No

If "yes," please supply the following information:

- | | | |
|----|---------------------------|-------------------------|
| a) | Alleged Crime: _____ | Police Agency: _____ |
| | Date of Occurrence: _____ | Case Disposition: _____ |
| b) | Alleged Crime: _____ | Police Agency: _____ |
| | Date of Occurrence: _____ | Case Disposition: _____ |
| c) | Alleged Crime: _____ | Police Agency: _____ |
| | Date of Occurrence: _____ | Case Disposition: _____ |

Part IX – Traffic Record

*****You are required to submit a 3-Year Driver's History at the time you submit the Background Booklet and your application, in addition to completing this section of the booklet.*****

- | | | |
|---|-----------------------|------------------------|
| 1. Current Driver's License Number: _____ | State of Issue: _____ | Expiration Date: _____ |
| 2. List all states where you have held a driver's license or state identification card: _____ | | |
| 3. Has your drivers' license ever been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| If "yes," give date, location, and reasons: _____ | | |

4. Briefly describe any traffic accidents in which you have been involved:
- | | | | |
|----|-----------------------------------|-----------------------------|------------------------|
| a) | Accident date _____ | City/State: _____ | Injury Accident? _____ |
| | Did the police investigate? _____ | Investigating Agency: _____ | |
| | Description of Accident: _____ | | |
| b) | Accident date _____ | City/State: _____ | Injury Accident? _____ |
| | Did the police investigate? _____ | Investigating Agency: _____ | |
| | Description of Accident: _____ | | |

Part IX – Traffic Record Continued

c)	Accident date _____	City/State: _____	Injury Accident? _____
	Did the police investigate? _____	Investigating Agency: _____	
	Description of Accident: _____		
d)	Accident date _____	City/State: _____	Injury Accident? _____
	Did the police investigate? _____	Investigating Agency: _____	
	Description of Accident: _____		
e)	Accident date _____	City/State: _____	Injury Accident? _____
	Did the police investigate? _____	Investigating Agency: _____	
	Description of Accident: _____		
f)	Accident date _____	City/State: _____	Injury Accident? _____
	Did the police investigate? _____	Investigating Agency: _____	
	Description of Accident: _____		

5. To the best of you memory, list all the driving citations you have received **as an adult and as a juvenile**, excluding parking tickets:

a)	Citation/Charge: _____	Month/Year: _____
	City/State _____	Disposition _____
b)	Citation/Charge: _____	Month/Year: _____
	City/State _____	Disposition _____
c)	Citation/Charge: _____	Month/Year: _____
	City/State _____	Disposition _____
d)	Citation/Charge: _____	Month/Year: _____
	City/State _____	Disposition _____
e)	Citation/Charge: _____	Month/Year: _____
	City/State _____	Disposition _____
f)	Citation/Charge: _____	Month/Year: _____
	City/State _____	Disposition _____
g)	Citation/Charge: _____	Month/Year: _____
	City/State _____	Disposition _____
h)	Citation/Charge: _____	Month/Year: _____
	City/State _____	Disposition _____

Part X – Membership in Organizations (Past and present)

1. Name & Address of Organization	Type (Social, Professional, etc.)	From:	To:
a)			
b)			
c)			
d)			

Part XI – Personal Declarations (General)

1. Have you ever **made application for employment** with the Covington Police Department, Covington Fire Department or Covington-Newton County 911 or any other public safety agency? Yes No
If yes, please supply the following information:

Agency Name	Job Applied For	Date(s)	Status of Application
a)			
b)			
c)			

2. Have you ever **worked for** any public safety agency in a paid and/or volunteer capacity? Yes No
If yes, please supply the following information:

Agency Name	Job Title	Paid/Volunteer	Date(s) (to/from)	Supervisor's Name
a)				
b)				
c)				

3. Do you have or ever had **any** Public Safety Certification? Yes No
If yes, please supply the following information:

Training Center	Agency Name	Date	Certification Number (if known)
a)			
b)			
c)			

4. Are you willing and able to work the following types of schedules: Yes No

a) Day shift -	d) Night shift -	e) Weekends -	f) Holidays -	g) Overtime -
b) 12 hr 15 min regular shifts -		If no, to any of these, please explain:		
c) Be "on-call" for scheduled period -				

Part XI – Personal Declarations (General) Continued

5. Do you have any relatives that are employed with The City of Covington? Yes No
 Relatives include, but are not limited to, brothers, sisters, parents, grandparents, cousins, aunts, uncles, in-laws, etc...
 If yes, please list below:

Name	Relationship to You	Department In Which They Work
a)		
b)		
c)		

Part XII – Personal Declarations (Controlled Substances/Illegal Substances)

Alcohol/Liquor Consumption:
 1. Describe in your own words, the frequency and extent of your use of intoxicating liquors:

2. Declare if you have used or tried any of the substances below **even once** (excluding legitimate prescriptions). List any other substances/controlled substances you have taken not listed below.
You will be questioned on this information during your background interview later in the process.

Substance	Date First Used*	Date Last Used*	Total # of Times Used	Avg Times Used (per week, month)	Total Time Used (# of months/hrs)	Never Used, <u>Not Even One Time</u>
a) Marijuana/Hashish						
b) Amphetamines/Speed						
c) Methamphetamine						
d) Cocaine/Crack						
e) Heroin						
f) Inhalants						
g) LSD						
h) PCP						
i) Barbiturates/Tranquilizers						
j) Hallucinogenics						
k) Ecstasy						
l) Steroids						
m) Any other illegal drug:						

n)						
o)						
*Month and year must be included, particularly if the use was within the past five (5) years.						

(Attach extra copies of this section if necessary to provide a complete history)

Part XII – Personal Declarations (Controlled Substances/Illegal Substances) Continued

3. Have you ever sold drugs or narcotics to anyone? (yes/no)	If yes, explain in detail
4. Have you ever given or furnished drugs or narcotics to anyone? (yes/no)	If yes, explain in detail:

Part XIII – Miscellaneous Questions

1. Do you know of anything that might prevent you from obtaining the position you have applied for? (yes/no) If yes, please provide explanation in detail:			
2. Is there any reason why you cannot work flexible, rotating shifts, which are related to your job assignment or duties? (yes/no) If yes, please provide explanation in detail:			
3. Have you purposely omitted any information from your employment application, resume, this document, or any other documentation you have submitted? (yes/no) If yes, please provide explanation in detail:			
4. Were you able to understand all of the questions in this document? (yes/no) If no, please provide explanation in detail:			
5. How did you find out about this position? Please circle the appropriate answer.			
a. advertisement	b. mailing list	c. job fair	d. other (explain)

Part XIV – Required Proof of Identification and/or Qualifications

<p>***DO NOT SUBMIT these documents with Background Booklet*** Be prepared to bring them with you to interviews and/or job offers.</p> <p>During the background investigation, applicants may be asked to provide various proofs to verify the statements made in the Background Booklet, employment application and during any investigation interviews or contacts. Examples of documentation that applicants should be prepared to provide <u>may include, but not be limited to:</u></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> • Birth certificate • Photo identification • High school diploma/GED certification • College diploma • College transcripts (proof of coursework) • Trade school diploma/certification • Licenses held (i.e. pilot, radio operator) • Training certification (i.e. First Aid/CPR) • Proof of military service (i.e. DD-214) </td> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> • Proof of employment (i.e. recent pay stubs, W2 forms, etc.) • Proof of job performance (i.e. letters of recommendation, performance evaluations, letters of commendation/discipline, etc.) • Current drivers license and/or driving abstract • Proof of vehicle liability insurance • Proof of vehicle registration </td> </tr> </table> <p>The person assigned to complete each candidate's background investigation/voice-stress analysis will determine what information he/she would like you to bring with you. However, since it may take you awhile to find and obtain the necessary documentation, please be prepared to gather this information in advance of your appointment.</p>	<ul style="list-style-type: none"> • Birth certificate • Photo identification • High school diploma/GED certification • College diploma • College transcripts (proof of coursework) • Trade school diploma/certification • Licenses held (i.e. pilot, radio operator) • Training certification (i.e. First Aid/CPR) • Proof of military service (i.e. DD-214) 	<ul style="list-style-type: none"> • Proof of employment (i.e. recent pay stubs, W2 forms, etc.) • Proof of job performance (i.e. letters of recommendation, performance evaluations, letters of commendation/discipline, etc.) • Current drivers license and/or driving abstract • Proof of vehicle liability insurance • Proof of vehicle registration
<ul style="list-style-type: none"> • Birth certificate • Photo identification • High school diploma/GED certification • College diploma • College transcripts (proof of coursework) • Trade school diploma/certification • Licenses held (i.e. pilot, radio operator) • Training certification (i.e. First Aid/CPR) • Proof of military service (i.e. DD-214) 	<ul style="list-style-type: none"> • Proof of employment (i.e. recent pay stubs, W2 forms, etc.) • Proof of job performance (i.e. letters of recommendation, performance evaluations, letters of commendation/discipline, etc.) • Current drivers license and/or driving abstract • Proof of vehicle liability insurance • Proof of vehicle registration 	

Part XV – Candidate Certification

- I hereby certify that there are **NO WILLFUL MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS** in the information I have provided in the Background Booklet and on any other additional documentation that I have attached to or provided along with the Background/Informational Booklet.
- I am fully aware that any such **MISREPRESENTATION, OMISSIONS, OR FALSIFICATIONS** will be grounds for immediate rejection of my application for employment and/or termination of my employment with Covington - Newton County 9-1-1 Communications Center.

Signature of Applicant: _____

Date: _____

Section A

Covington Police Department



COVINGTON POLICE DEPARTMENT SELECTION PROCESS

APPLICANTS – KEEP THIS PAGE FOR YOUR REFERENCE

Step 1

The Human Resources Director for the City of Covington shall review all applications for positions in the police department. This review will consider only the candidate's ability to meet standards for employment. The Human Resources Director shall have the responsibility of forwarding all qualified applications and the accompanying background booklets to the Assistant Chief of Police.

Step 2

The Assistant Chief of Police will conduct a criminal history check and driver's history check on all applicants.

Step 3

Applicants will then be required to complete a physical agility test of upper body strength and cardiovascular fitness. A departmental physical fitness instructor will administer this test.

Step 4

Applicants will then be assessed during an oral examination by a review board comprised of ranking officers. Candidates will be asked questions concerning:

1. Applicant's background information;
2. Initial application;
3. Personal Characteristics;
4. Mental ability;
5. Education;
6. Experience;
7. Ability to communicate;
8. Presence, appearance;
9. Personal goals and objectives.

Each selection panel member shall rate the candidate on a scoring sheet based on the interview.

A list of candidates and their rating will be recorded on a summary sheet. a score of 80 or better is required for placement on the list. Candidates will be selected from the list until all vacancies are filled. The list will remain active for a period of one year.

Step 5

Applicants will be required to take and successfully complete a POST entrance exam to attend the state regional academy. This exam will be given at the academy and applicants are required their own transportation to and from the exam. Applicants will be given a date, time, and directions to the exam location.

Step 6

An experienced investigator will conduct background investigations. The investigator conducting a background shall attach a written report of findings and recommendations to the background report. All records pertaining to an applicant's background will be forwarded to the Assistant Chief upon completion of the investigation. The background investigation will include:

1. Updated check of criminal record, if any.
2. Updated check of driving record, if any.
3. Verification of applicant's credentials (education experience).
4. Verification of past employment.
5. Verification of five (5) personal references.
6. Neighborhood canvas.
7. Check of applicant's financial background, if necessary.

Step 7

The investigator shall have a voice stress analysis and/or polygraph examination conducted on the applicant. Only personnel who are certified in voice stress analysis techniques or polygraph techniques will conduct the tests. Tests will be conducted at the Covington Police Department or other approved testing site, and results will be included in the applicant's background report. No applicant will be disqualified from appointment solely on the results of the voice stress analysis or the polygraph.

Step 8

Certification of eligible candidates will be made by the Assistant Chief of Police and forwarded to the Chief of Police for review. This list shall be maintained by the Assistant Chief in the event no positions are available. When a position becomes available, the Assistant Chief shall schedule candidates for the final interview with the Chief of Police. The Chief should have at least two candidates to choose from.

Step 9

The Chief of Police or his designee will then give the applicant a conditional offer of employment contingent that the applicant passes steps 10 and 11.

Step 10

The applicant is required to complete a psychological test. The results of this test will be forwarded to Psychological Research, Inc. for evaluation. The results will be placed in the applicant's background report and later in the personnel file if the applicant is hired.

Step 11

Applicants who are accepted for hiring will be required to have a medical examination and drug screen before they assume sworn status. A medical exam is also a requirement for Georgia P.O.S.T. A licensed physician will conduct medical examinations.

Step 12

The Chief of Police shall submit a written appointment recommendation to the Human resources Department in accordance with personnel policy.

**COVINGTON POLICE DEPARTMENT
PHYSICAL FITNESS ASSESSMENT**

The physical assessment test consists of a 1.5 mile run, push-ups and sit-ups. Every applicant is assessed in each category base on his or her age and is required to score an average score of 2.0.

Listed below is a scale of the requirements you must meet in each category according to your age.

AGE 20 - 29

1.5 MILE RUN

Excellent 10:15 or less	Good 10:16 - 12:00	Average 12:01 - 14:30	Below Average 14:31-16:30	Poor 16:31 - above
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PUSH-UPS

Excellent 3.0 43 or above	Good 2.5 42 - 28	Average 2.0 27 - 20	Below Average 0 19 - 5	Poor -1 5 - less
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SITS-UPS

Excellent 3.0 51 or above	Good 2.5 50 - 40	Average 2.0 39 - 35	Below Average 0 34 - 24	Poor -1 23 - less
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AGE 30 - 39

1.5 MILE RUN

Excellent 3.0 11.00 or less	Good 2.5 11:01 - 13:00	Average 2.0 13:01 - 15:30	Below Average 0 15:31-17:30	Poor -1 7:31 - above
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PUSH-UPS

Excellent 3.0 37 or above	Good 2.5 36 - 23	Average 2.0 22 - 17	Below Average 0 16 - 3	Poor -1 2 or less
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SIT-UPS

Excellent 3.0 45 or above	Good 2.5 44 - 34	Average 2.0 33 - 29	Below Average 0 28 - 18	Poor -1 17 or less
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AGE 40 – 49

1.5 MILE RUN

Excellent 3.0 11:30 or less	Good 2.5 11:31 - 14:00	Average 2.0 14:01 - 16:30	Below Average 0 16:31 - 18:30	Poor -1 18:31 - above
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PUSH-UPS

Excellent 3.0 28 or above	Good 2.5 27 - 18	Average 2.0 17 - 13	Below Average 0 12 - 2	Poor -1 1 or less
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SIT-UPS

Excellent 3.0 39 or above	Good 2.5 38 - 26	Average 2.0 25 - 19	Below Average 0 18 - 6	Poor -1 5 or less
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AGE 50 – 59

1.5 MILE RUN

Excellent 3.0 12:00 or less	Good 2.5 12:01 - 15:30	Average 2.0 15:31 - 17:30	Below Average 0 17:31 - 19:30	Poor -1 19:31 or above
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PUSH-UPS

Excellent 3.0 16 or above	Good 2.5 15 - 13	Average 2.0 12 - 9	Below Average 0 8 - 1	Poor -1 0
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SIT-UPS

Excellent 3.0 33 or above	Good 2.5 32 - 19	Average 2.0 18 - 6	Below Average 0 5 - 1	Poor -1 0
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Section B

Covington Fire Department



COVINGTON FIRE DEPARTMENT
So you want to be a firefighter...

A Message from the Fire Chief:

The purpose of this information is to aid each firefighter applicant in preparing successfully for the challenging screening procedures employed by the Covington Fire Department in testing for the position of firefighter. We believe that adequate knowledge and prior familiarization with the test items will greatly increase the probability of passing these tests.

I wish to emphasize that merely following the guidelines will not guarantee success. There are individuals who, for a variety of reasons, may not be capable of the demands of firefighting. Nevertheless, if you intend to apply, either here or somewhere else, we urge you to prepare as well as possible and wish you good luck!

Sincerely,
Don T. Floyd, Fire Chief

Table of Contents

- Introduction
- Written Examination
- Physical Ability Test
- General Instructions for Physical Ability Test
- The Physical Ability Test in Detail
- The Oral Interviews
- The Background Examination
- The Job Offer
- The Medical Physical Examination
- The Start Date

Introduction

Firefighting involves extremely hard and skillful physical exertion, as well as the ability to cope with emergency situations. The physical demands of firefighting are often underestimated. Because of this, many firefighter applicants are overwhelmed by the challenging, screening procedures employed in the selection of new recruits. Demanding physical standards are absolutely necessary because firefighting requires a high level of physical fitness.

For example, consider the following circumstances: A four-story building is on fire. As a firefighter rushes upstairs to the fourth floor, a cry for help is heard. The firefighter must react quickly in order to rescue the victim. When the victim is reached, he/she must be led or carried outside to safety. Once this is accomplished, the firefighter must re-enter the building and battle the fire.

Written Examination

An applicant who is accepted for testing will begin with the written examination. Applicants must achieve a passing grade of at least 70% on the written portion of the examination in order to proceed on to the next phase of the examination process. The type of written examination used by the Covington Fire Department is a standardized instrument used by many fire departments throughout the nation. In general, the examination tests general aptitude and reading comprehension. Prior knowledge of the fire/rescue service is not a prerequisite for successful completion of this examination.

Applicants who successfully complete the first two phases of the testing process will appear before the Fire Department Hiring Task Group for an oral interview

Physical Ability Test

The physical ability test is composed of seven (7) stations designed to simulate actual evolutions that must be performed by firefighters working at emergencies. The physical ability test must be completed within seven (7) minutes, and is graded on a "pass-fail" basis; passing this portion of the examination qualifies the candidate to move onto the next phase of the examination process. Traditionally, applicants with slight builds or those in poor physical condition have experienced difficulty with the physical ability screening process. This situation can be corrected through a conscientious physical -conditioning program. The physical conditioning program should emphasize cardio-respiratory (heart-lung) fitness, strength, and muscular endurance. A program which includes both running and weight training is desirable in order to achieve the desired results.

The physical ability test is intended to be physically challenging. Only applicants who consider themselves physically fit should take the test. **Applicants are required to provide a medical release from a licensed physician before proceeding with the test.**

General Instructions for Applicants Participating in Physical Ability Test

- A. All listed evolutions will be performed while wearing protective clothing. Protective clothing will be supplied by the Fire Department, and includes coat and helmet, gloves, and self-contained breathing apparatus. This equipment must be worn at all times during the test.
- B. On the day of testing, all applicants are required to wear long pants, (jeans, sweatpants). Kneepads are strongly recommended. Shorts are not allowed. Shoes for the physical ability test are the responsibility of the applicant. It is suggested that applicants wear jogging or athletic-type (non-cleated) shoes to the test site.
- C. All applicants must successfully complete the physical ability test in order to proceed with the examination process. Failure to perform any of the seven (7) evolutions in a satisfactory manner will result in failure of the physical ability test, and elimination from further consideration as a candidate for employment.
- D. The maximum acceptable time for the physical ability test will be seven (7) minutes. Time will start at the beginning of the first evolution and will stop upon completion of the seventh evolution, or when passing the 7 minute maximum allowable time. Applicants will be permitted to rest during any portion of the evolutions; however timing will continue unchecked during any rest period.
- E. At no time during the physical ability test will applicants be permitted to run or jog. Running is defined as moving so quickly that both feet are simultaneously off the ground.

- F. Safety will be observed at all times during the test. If a candidate becomes sick or if it appears that he or she could become injured, the Test Evaluator will stop the test.

The Physical Ability Test in Detail

The seven- (7) evolutions of the test are as follows:

1. Body Drag: Given a simulated fire victim with a weight of approximately 160 lbs. (I.A.F.F. Rescue Randy), the candidate will drag same for a distance of 100 feet.
 - Procedure: The applicant will approach the rescue dummy and drag same a distance of 100 feet.
 - Job Relatedness: Firefighters are required to remove fire victims from structures during emergency situations, and this task is often completed by one firefighter. A weight of 160 lbs. represents the average weight of potential victims.

2. High-Rise Pack Carry: The candidate shall advance a simulated department high-rise pack for a pre-determined distance while ascending and descending stairs.
 - Procedure: The applicant picks up the high-rise pack from the base of stairs and carries the pack while ascending and descending stairs. (3 repetitions required)
 - Job Relatedness: When preparing to operate on fires above ground level or extend existing hose lines, firefighters must have the capability to aggressively and rapidly advance standardized department high-rise packs of fire hose.

3. Simulated Roof Ventilation: The candidate will strike a railroad tie with an 8-lb. sledge hammer, moving a distance of 5 feet.
 - Procedure: While standing on two runners, equal in size to the railroad tie, applicant will drive the middle railroad tie to the pre-determined distance using the sledgehammer provided.
 - Job Relatedness: In order to effectively ventilate the roof on an average building, the firefighter would be required to strike the roof a minimum of 50 times in order to complete the evolution. This evolution is normally accomplished using an eight-pound pick head axe; however, a sledge hammer of equal weight is substituted for safety purposes.

4. Ladder Carry: The candidate will remove a one-person ladder from a designated fire apparatus, place it on the ground, and replace same.
 - Procedure: The applicant will approach a fire apparatus (or its height equivalent), remove a ladder, and replace same when directed to do so.
 - Job Relatedness: Firefighters must have the ability to remove and maneuver ladders from fire apparatus to the scene of emergencies.

5. Ladder Extension: Given an extension ladder, the candidate shall demonstrate the ability to raise and extend a 24-foot extension ladder to a designated height and retract the same.
 - Procedure: The applicant shall approach an extension ladder, grasp the ladder by the top rung and using the "hand-over-hand" method, raise the ladder to a vertical position. Then applicant will grasp the rope halyard and pull in order to extend fully the fly section of the ladder. Then place it against the building, move it back to the vertical position, retract the fly section, and place the ladder back in the starting position. The ladder will be fully extended and retracted using the halyard in a "hand-over-hand" method.
 - Job Relatedness: Firefighters must have the ability to quickly extend and retract ladders on the scene of emergencies to effect rescues, as well as provide a means of access for fire attack and ventilation operations

6. Hose Extension: Given a 100' length of 1 3/4" hose, the candidate shall drag the hose for a distance of 100'.
- ❑ Procedure: The applicant will approach 100feet of charged 1 3/4" fire hose and nozzle which is in an extended accordion fold and grasp same. The applicant then moves forward until the entire 100 feet of hose is stretched out, and places the nozzle inside an 18" square.
 - ❑ Job Relatedness: 1 3/4" hose, which is used for structural firefighting, is carried on many engine companies. A firefighter occupying the nozzle position on an engine company must be able to extend the hose line to the point of fire attack.
7. Confined Space: the candidate shall follow a hose line while in a simulated darkened area.
- ❑ Procedure: The candidate will wear a SCBA facemask (blacked out to simulate a darkened room) and crawl on hands and knees across the length of a 100' laid out hoseline. Once the candidate reaches the end of the hose line, he/she will be instructed to take off facemask.
 - ❑ Job Relatedness: This component tests endurance, as well as ability to maintain spatial orientation and freedom from claustrophobia.

Non-Timed Component

Aerial Ladder Climb: The candidate will be required to climb an aerial ladder to a height of 100'. The ladder will be positioned at 70 degrees to facilitate a comfortable climbing position. From the platform you will raise a roll section of 2.5" hose 50' and lower to starting position. You will be outfitted with a safety harness, helmet and gloves.

After successful completion of the Physical Ability Test, applicants will go on to challenge the Oral Interview.

The Oral Interview (s)

The next phase in the selection process for the position of firefighter with the City of Covington Fire Department is the oral interview. The oral interview is designed to give interviewers a "first look" at the candidate, and allow him or her the opportunity to respond to a set of verbal questions.

The interview process is highly structured, with three or four interviewers participating in the process. Each candidate will be asked to respond to the same set of questions, and may be asked to elaborate on specific responses. Candidates will be graded by the interviewers based on their overall responses to questions, general appearance, and perceived ability to contribute to the organization in a positive manner. Following successful completion of the written examination, physical ability test and oral interview, remaining candidates will be placed on an eligibility list for employment with the Fire Department. Each candidate will be categorized as "outstanding", "well qualified", or "qualified", depending on his or her final composite score.

Prior to being offered a position with the Covington Fire Department, each qualified candidate will participate in a "one-on-one" interview with the Fire Chief.

The Background Examination

The final hurdle in the hiring process for Firefighter with the Covington Fire Department is an examination of each candidate's personal background. This examination involves a routine check of criminal and driving records by the Covington Police Department, drug screening, and discussions with previous employers and references as provided by the candidate.

Job Offer

Upon successful completion of the physical ability test, the written exam and oral interviews, a list of qualified candidates will be sent to the Human Resources Department. The Human Resource Manager will make a conditional job offer to the top candidate(s). Upon acceptance of the job offer, a complete medical physical and drug screen will be scheduled.

Physical Examination

Each candidate will be required to pass a physical examination prior to being hired. The examination is comprehensive and includes blood work, stress-EKG testing, chest X-rays, and drug screen testing. This examination is rated on a "pass-fail" basis.

The Start Date

Upon the successful completion of all steps, The Human Resources Department will assign the date that your employment will begin with the City of Covington.

Again, thank you for your interest in the Covington Fire Department. We wish you success in the process.

Section C

Covington-Newton County 911



Covington - Newton County 911 Communications Center

8146 Carlton Trail, NW
Covington, GA 30014
(678) 342-8790 Fax (770) 385-2106



Mike Smith
Director

APPLICANTS – KEEP THIS PAGE FOR YOUR REFERENCE

AN "ELIGIBILITY LIST" WILL BE CREATED TO FILL VACANCIES FOR UP TO ONE (1) YEAR.

JOB DUTIES

Covington-Newton County 9-1-1 Communications Center is recruiting individuals who want an exciting, lifesaving and fulfilling career in 9-1-1 Communications. We will train successful candidates to respond to emergency calls and dispatch police, fire and medical personnel and resources.

9-1-1 Communications Dispatchers:

- Handle emergency and non-emergency phone calls, complaints and inquires from the public.
- Assess a caller's emotional state and prioritize calls based on request urgency.
- Respond to public safety responders' needs and requests from the field.
- Operate 2-way radios, Computer Aided Dispatch (CAD) and other communication tools.
- Remember and accurately follow complex instructions and protocols while working in a busy, loud, stressful and multi-tasking environment.
- Memorize and accurately recall Newton County geography, including the location of major roads, neighborhoods, schools, parks, key landmarks and buildings and the overall addressing system.

PLEASE NOTE:

SHIFT WORK IS **MANDATORY**. Covington-Newton County 9-1-1 runs 24-hours a day, 365-days a year. Shifts assignments are determined at time of employment.

QUALIFICATIONS – Successful 9-1-1 Dispatcher candidates come with a variety of experience, education and training that demonstrates knowledge and skills to perform intensive work in a multi-tasking, multi-sensory, stressful work environment. 9-1-1 Dispatcher candidates must:

1. Have a High School diploma or GED certification.
2. Be at least 18 years of age prior to hire.
3. Have at least one (1) year of recent, stable and reliable work experience.
4. Pass an extensive background investigation.
- 5. Have no felony convictions.**
6. Have reliable transportation to get to / from work at all hours of day or night (e.g. 9pm or 3am, etc.).
7. Have a working telephone.

- Have excellent interpersonal communication skills.
- Take direct orders as well as constructive criticism and feedback without being defensive.
- React quickly and correctly to emergency situations.
- Perform extensive data entry with speed and accuracy based on written and/or verbal sources.
- Learn, retain and apply complex and detailed procedures, such as police and fire dispatching.

A Dispatcher must be able and willing to:

- Work mandatory overtime as needed and assigned.
- Demonstrate reliable and predictable attendance.
- Study, learn and practice job skills throughout the training and on-the-floor rotations.
- Train and work under pressure in a loud, multi-tasking environment.

Covington - Newton County 911 Communications Center

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Covington, GA 30014
(678) 342-8790 Fax (770) 385-2106



Mike Smith
Director

SELECTION PROCESS

APPLICANTS – KEEP THIS PAGE FOR YOUR REFERENCE

Step 1

The Human Resources Officer for the City of Covington shall review all applications for positions in the 9-1-1 Center. This review will consider only the candidate's ability to meet standards for employment. The Human Resources Officer shall have the responsibility of forwarding all qualified applications to the Director of Communications.

Step 2

All eligible candidates will be notified by mail and telephone of an upcoming date for a Profile Examinations Inc., assessment. Testing will be conducted in groups and all candidates will be tested on the same date and time, failure to attend the assessment will result in the candidate's ineligibility.

Step 3

The following information, once gathered, shall be forwarded to the selection panel for review.

1. Applicant's background form
2. Initial application

The 9-1-1 Center selection panel will then review the applications; this review will consider only the candidate's ability to meet standards for employment. The selection panel will comprise a list of qualified applicants and forward to the administrative assistant. The administrative assistant will then schedule interviews for those applicants with the selection panel.

Step 4

Applicants will then be assessed during an oral interview by the selection panel. Candidates will be asked questions concerning:

1. Experience
2. Knowledge and Perception of the Position
3. Personal Characteristics
4. Mental ability
5. Ability to communicate
6. Personal goals and objectives

Applicants will also be required to perform a written exercise. The applicant will be judged on their ability to completely and appropriately answer the questions provided in an acceptable written format.

Each selection panel member shall rate the candidate on a scoring sheet based on the gathered information and review.

Step 5

A background and record check will be performed after completion of the background reports received by the Director of Communications; they will be forwarded to the Covington-Newton County 9-1-1 Team Leaders for verification. The background investigation will include:

1. Check of criminal record, if any
2. Check of driving records, if any
3. Verifications of applicant's credentials (education experience)
4. Verification of past employment
5. Verification of five (5) personal references

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Mike Smith
Director

SELECTION PROCESS

APPLICANTS – KEEP THIS PAGE FOR YOUR REFERENCE

CONTINUED

The Team Leader conducting a background check shall attach a written report of findings and recommendations to the background report. All records pertaining to an applicant's background will be forwarded to the Director of Communications upon completion of the selection process, to be later returned to the City of Covington Human Resources Department for storage in secure files. Covington-Newton County 9-1-1 personnel trained in collecting background information will conduct backgrounds.

Step 6

A final list of eligible candidates will be made, according to the results of the assessment, and maintained by the Director of Communications. When a position becomes available, the Director of Communications shall schedule candidates for the final interview. The Director of Communications should have at least two (2) candidates to choose.

Step 7

The Director of Communications and the Human Resources Director will conduct an oral interview with the applicant; during the interview, qualified applicants will be given a conditional job offer on the condition that the applicant passes steps 8, 9, and 10.

Step 8

An investigator shall conduct a voice stress analyzer test on the applicant. Candidates shall be provided with a list of areas from which the voice stress analyzer test questions will be drawn from, prior to the test. Only personnel who are trained in voice stress analyzer techniques and procedures will conduct the test. Tests will be conducted at the Covington Police Department or other approved testing sites, and results will be included in the applicant's background report. No applicant will be disqualified from appointment based solely on the results of the voice stress analyzer test.

Step 9

The applicant is required to complete a psychological test. The results of this test will forward to Psychological Research, Inc. for evaluation. The results will be placed in the applicant's background report and later in the personnel file if the applicant is hired.

Step 10

Applicants who are accepted for hiring will be required pass a medical examination and drug screen before they are officially hired. A medical exam is also necessary for Georgia P.O.S.T. requirements. A licensed physician will conduct medical examinations. The results will be placed in the applicant's background report and later in the personnel file if the applicant is hired.

Step 11

The Director of Communications shall submit a written appointment recommendation to the Human Resources Director in accordance with personnel policy.

Covington - Newton County 911 Communications Center

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(678) 342-8790 Fax (770) 385-2106



Mike Smith
Director

ACKNOWLEDGEMENT & UNDERSTANDING
WORK SCHEDULE

I understand that if I am hired for the position of **Communications Technician**, for the Covington – Newton County 9-1-1 Communications Center, it will involve my working any of numerous shifts. I understand that I may be assigned to any shift and that at the discretion of my supervisor, I may be rotated to another shift with little or no notice.

The 9-1-1 Center operates two (2) shifts. Each shift is twelve (12) hours and fifteen (15) minutes long. They are as follows:

- | | | |
|----|-------------|-------------|
| 1. | Day Watch | 0545 – 1800 |
| 2. | Night Watch | 1745 – 0600 |

The 9-1-1 Center has four (4) teams. Each team is labeled: A Team, B Team, C Team, or D Team. The 9-1-1 Center operates on a two (2) week (14 day), work period. The teams alternate days working, where each team has one three (3) day weekend in a work period. Example (Teams A and B work Monday, Tuesday, Friday, Saturday, and Sunday of the first week, then only Wednesday and Thursday of the second week. Teams C and D work the opposite days from Teams A and B, being: Wednesday and Thursday of the first week and Monday, Tuesday, Friday, Saturday, and Sunday of the second week.)

The teams also rotate from day watch to night watch. Teams A and C are “sister teams” and they work the same rotation; while, Teams B and D are “sister teams” and they work the same rotation opposite of Teams A and C. Example (Monday and Tuesday, Team A works day watch, while Team B works night watch. Wednesday and Thursday of that same week, Team C works day watch, while Team D works night watch.) This rotation changes after the team’s last three (3) day weekend in every 90-day period.

I understand that these hours can change at any time with little or no notice and shifts/hours are not negotiable.

I understand the above conditions and have no objections to them.

Printed Name of Applicant

Signature of Applicant

Date

Notary Public