

**LAUDERDALE COUNTY EMERGENCY MANAGEMENT  
COMMUNICATION DISTRICT 911**

**JOB DESCRIPTION**

**Title: Entry-Level Telecommunicator**

Note: Statements included in this description are intended to reflect in general the duties and responsibilities of this classification and are not to be interpreted as being all inclusive. The employee may be assigned other duties that are not specifically included.

**Relationships**

Reports to:	EMA / 911 Director, Telecommunication Center Manager, Telecommunication Supervisors
Subordinate Staff:	None
Other internal contacts:	911 Board Members; 911 Staff; EMA Staff; Local Area Law Enforcement And Fire Agencies; Emergency Medical Providers; City and County Departments
External contacts:	General Public

**Job Summary**

This is a complex, safety sensitive position, involving a person in the capacity of complaint clerk and radio dispatcher. Receive requests for assistance in the form of law enforcement, fire or emergency medical service response. Answer 911 trunk lines in the answering point and decide in the shortest time possible whether to direct the call to law enforcement, fire, or EMS services.

The time gap between dispatch and/or notification and the arrival of emergency units is a difficult area. The caller is on his/her/their own until help arrives. Possess the skills and abilities necessary to decide whether to stay on line and provide assistance and comfort or to terminate the call.

**Responsibilities and Duties**

**A. Law Enforcement**

Receives emergency calls via 911 and quickly and accurately transmits the call to the appropriate Law Enforcement Agency. Lauderdale County Law Enforcement Agencies are dispatched as required by their protocols.

**B. Fire Department**

Receives fire calls via 911. Dispatches Florence Fire and the fourteen Volunteer Fire Departments within Lauderdale County. Maintains CAD records on all calls received for Fire in Lauderdale County.

**C. Emergency Medical**

Connects callers directly to the ambulance service provider.

**D. Emergency Management, Search & Rescue, State Troopers and Marine Police**

Dispatches these units as the need arises, and maintains radio contact throughout the emergency operation.

## **General Qualifications for Employment**

Any person applying for a position or employed by 911 must maintain/qualify under the following guidelines  
(Any item with an asterisk will be taught on the job):

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### **Knowledge, Skills & Abilities**

1. Graduate of an accredited high school approved by the State Department of Education or shall be the holder of a certificate of high school equivalency (GED).
2. Any combination of education and experience that provides the necessary qualifications listed.
3. Verbal skills to communicate with 911 personnel and the general public in normal and emergency situations.
4. Ability to understand oral and written instructions and ability to relay information quickly and accurately.
5. Ability to type.
6. Ability to do multiple tasks then write down the sequence.
7. Writing skills to complete various forms, records, reports.
8. Knowledge of emergency operation procedures.\*
9. Ability to concentrate and remain calm while acting quickly during stressful emergency situations.
10. Fluent in the English language.
11. Ability to write quickly and legibly.
12. Have general knowledge of map reading.
13. Knowledge of general office practices and procedures.
14. Ability to learn and memorize codes and numbers, etc.
15. Have the ability to maintain a pleasant relationship with other employees, other city and County departments and volunteer agencies.

### **Physical Characteristics**

1. Not be less than nineteen (19) years of age at the time of employment.
2. See well enough to read maps and instrument gauges; corrective lens acceptable.
3. Hear well enough to talk on the telephone and two-way radio; hearing aid acceptable.
4. Speak well enough to address co-workers, general public and transmit factual information by radio and telephone.
5. Body movement and mobility to move around office to operate equipment and stock emergency supplies.
6. Strength and endurance to remain active for long periods of time in emergency situations.
7. Use of hands to write, type, and operate radio equipment.
8. Be willing to have a pre-employment medical examination.
9. Be in good health as determined by a physical examination.
10. Possess good judgment and be able to handle delicate situations with discretion.
11. Be neat and clean in appearance.

### **Other**

1. Must be a resident of Lauderdale County.
2. Must possess a current Alabama driver's license.
3. Must provide a voter's certificate from the Lauderdale County Board of Registrars.
4. Certified in CPR: Adult, Child and Infant.\*
5. Certified by APCO 33 Standards Course\*
6. Certified in APCO Basic Tele-Communications\*
7. Certified in Alabama Law Enforcement Agency Computer Terminal Operations. (NCIC)\*
8. Must be willing to participate in and travel to training sessions in and out of state when necessary.
9. Must be willing to sign a Non-Disclosure and Confidentiality Agreement.
10. Must be willing have a background check and to be finger-printed – providing driver license and social security card.
11. Must be a person of good moral character and good reputation, not have been convicted of a felony or a misdemeanor involving force, violence or moral turpitude.
12. Must successfully complete pre-employment drug tests as well as routine and/or random drug tests.
13. Must be willing to work non-standard hours to provide 24 hour coverage when necessary.
14. Must be willing to wear appropriate attire/uniforms.
15. Must have a working mobile phone and willing to carry any specified device for ease of communications 24 hours daily.
16. Must have an active bank account suitable for direct deposit of earnings.

## **Lauderdale County 911 Applicant Instructions**

Please read the application and requirements carefully.

You must turn the application and required documentation in to:

**EMA/911 Office  
110 W College Street  
Room B20 or 22 (Basement of City Hall)  
Florence, AL 35630**

Application Packet Requirement\* Checklist:

- Completed Application\*
- Voter Registration Card\* (Copy)
- Driver License\* (Copy)
- Social Security Card\* (Copy)
- Certifications Pertaining to this position (Optional)

Incomplete applications will not be considered.

If you have any questions, please contact our office 256-760-0911.



Lauderdale County Emergency Management  
Communication District

Today's Date: \_\_\_\_\_

Position Wanted: \_\_\_\_\_

**Application for Employment**  
(ANSWER ALL QUESTIONS AND PLEASE PRINT CLEARLY)

Full-Time \_\_\_\_\_  
Part-Time \_\_\_\_\_

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Education and Training**

Type	Years Attended	Graduate?	School Name & Location	Course/Degree
High School		Y or N		
College		Y or N		
Vocational		Y or N		

(Additional Education and Training may be listed on the next page)

Have you ever been convicted of a felony? Yes \_\_\_ No \_\_\_ If yes, explain: \_\_\_\_\_

(Such record may be relevant if job related, but does not bar you from employment)

Are you a citizen of the U.S. or a registered alien authorized to work in the U.S.? \_\_\_\_\_ Are you over 19 years old? \_\_\_\_\_

Are you presently employed? \_\_\_\_\_ If "yes", may we contact your employer? \_\_\_\_\_

List three references (not relatives or supervisors) with address and phone number.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Employment Record**

Current or Last Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Address: \_\_\_\_\_ Type of Business: \_\_\_\_\_  
 Name & Title of Supervisor: \_\_\_\_\_ Your Job Title: \_\_\_\_\_  
 Duties & Responsibilities: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_ Dates of Employment \_\_\_\_\_ to \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Address: \_\_\_\_\_ Type of Business: \_\_\_\_\_  
 Name & Title of Supervisor: \_\_\_\_\_ Your Job Title: \_\_\_\_\_  
 Duties & Responsibilities: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_ Dates of Employment \_\_\_\_\_ to \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Address: \_\_\_\_\_ Type of Business: \_\_\_\_\_  
 Name & Title of Supervisor: \_\_\_\_\_ Your Job Title: \_\_\_\_\_  
 Duties & Responsibilities: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_ Dates of Employment \_\_\_\_\_ to \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Address: \_\_\_\_\_ Type of Business: \_\_\_\_\_  
 Name & Title of Supervisor: \_\_\_\_\_ Your Job Title: \_\_\_\_\_  
 Duties & Responsibilities: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_ Dates of Employment \_\_\_\_\_ to \_\_\_\_\_



**Lauderdale County  
Emergency Management  
Communication District**

An Equal Opportunity Employer

Any additional experience related to position applying for: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special Skills/Certifications: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Include a copy of the certificate or verification of training where applicable)

Please explain any gaps in employment: \_\_\_\_\_  
\_\_\_\_\_

Additional Comments or Information you would like to have considered:

**Read Carefully and Sign**

I solemnly declare and affirm that all answers and statements in this application are wholly true, full and correct in every particular and detail and I further authorize the Lauderdale County Emergency Management Communication District to investigate and verify all statements listed above. I understand that a background check will be performed and fingerprinting will be necessary. I agree to abide by and comply with all laws of the State of Alabama, and the Rules and Regulations, Working Conditions, Policies and Procedures established by the Lauderdale County Emergency Management Communication District by which I am employed.

I understand that misrepresentations as to preexisting physical or mental conditions may void my workers' compensation benefits. I also understand that if I suffer an on-the-job injury, I may be required to submit to a drug or alcohol test. Failure to submit to a test, or a positive result, may be reason for denial of workers' compensation.

I verify that I have read the job duties and qualifications of the position for which I am applying and that I meet all the qualifications required by the position, including holding any certification or license necessary for the performance of the essential job functions, and that I am able to perform all the essential functions of the position with, or without accommodations. I understand that I must be a resident of Lauderdale County, Alabama and have provided a voter's registration card to verify this requirement.

Applicant's Signature

Date

Lauderdale County Emergency Management Communication District encourages all candidates to make known any accommodations needed during the process of making application for a position with LEMCD, whether it be making available materials in larger print, furnishing someone to help fill out an application or read a job description, or other accommodations. In order for us to make arrangements for some accommodations, such as a qualified sign interpreter, we request 48-hour notice in order to best serve these needs.

**VOLUNTARY AFFIRMATIVE ACTION INFORMATION**

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or disability, or any other legally protected status.

Referral Source:

Advertisement \_\_\_\_\_ Employee \_\_\_\_\_ Relative \_\_\_\_\_ Walk-In \_\_\_\_\_ School \_\_\_\_\_ State  
Employment Agency \_\_\_\_\_ Private Employment Agency \_\_\_\_\_ Other \_\_\_\_\_

Name of source (if applicable) \_\_\_\_\_

As required, we comply with government regulations including Affirmative Action obligations where they apply.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations, we ask that you complete this applicant data survey. Your cooperation is appreciated.

Please be advised that your survey is not part of your official application for employment. It is considered confidential information that will *not* be used in any hiring decision.

Male \_\_\_\_\_ Female \_\_\_\_\_  
Hispanic \_\_\_\_\_ Black \_\_\_\_\_ White \_\_\_\_\_ American Indian/Alaskan Native \_\_\_\_\_ Asian/Pacific Islander \_\_\_\_\_  
Check if any of the following are applicable:  
Vietnam Era Veteran \_\_\_\_\_ Disabled Veteran \_\_\_\_\_ Individual with Disability \_\_\_\_\_