

JOB DESCRIPTION
NOBLE POLICE DEPARTMENT
PART TIME FACILTY ACCESS OPERATOR

OCCUPATIONAL TITLE: Part Time Facility Access Operator

DEPARTMENT/DIVISION: Police/Animal Control

GENERAL DEFINITION: This is Part Time work assisting in the upkeep and allowing access to the Noble Animal Shelter and access to the City of Noble's Brush Dump over weekends. The projected hours of weekend operation would be Saturday between 10 am until 3 pm.

This employee reports to and receives general direction from the Animal Control Officer. Duties are performed under general supervision in accordance with established standards, policies, and regulations. This work may occasionally involve safety hazards and strenuous physical activity; and occasionally involves the exercise of initiative and independent judgement.

ESSENTIAL FUNCTIONS AND DUTIES: (The items, listed below, are not intended to be a complete listing of all essential functions and duties of this position.)

1. Care for impounded animals in the City's animal shelter;
2. Assist in the cleaning and general maintenance of the City's animal shelter;
3. Control access to the animal shelter as required; to enable the public to see what animals are adoptable, and adopt animals out; to release animals to owners after they have paid all fees.
4. Control access to the City's brush dump, checking to ensure only residents are dumping brush in the brush dump or large trash in the large trash haul-off;
5. Communicate with the Police Department Dispatch to log opening and closing times

MINIMUM QUALIFICATIONS:

1. Knowledge equivalent of a high school diploma and such training and/or experience as would provide the applicant with the below referenced knowledge, skills, and abilities;
2. Knowledge of animal behavior characteristics;
3. Working knowledge of the methods, techniques, and procedures to care for the animals in the shelter;
4. Ability to apply tact and diplomacy in the relationships with visitors to the shelter and brush dump;
5. Demonstrated physical fitness abilities;
6. Ability to work with minimal supervision;
7. Must possess a valid Oklahoma Drivers license, and be insured.

WORKING CONDITIONS/PHYSICAL REQUIREMENTS

1. Some exposure to unpleasant weather and requires continuous attention to safe working and operating procedures to ensure the safety of one's self and fellow citizens;
2. Must have the visual acuity to identify problems and detect danger;
3. Must possess aural acuity to understand conversation in quiet and noisy environments and understand radio transmissions;
4. Speech and hearing required to effectively transmit information via the radio and in person;
5. Exposure to animal bites, stressful situations, and offensive smells;
6. Must have strength to lift, pull and push 75 pounds on a frequent basis and lager weights on occasion;
7. Stamina to exert self throughout the day in all weather conditions.

SUPERVISION: The Part Time Facility Access Operator performs under direct supervision of a superior officer at the direction of the Police Chief or his/her designee. The Part Time Facility Access Operator reports to the Animal Control Officer

FLSA Status: non-exempt

This job description should not be interpreted as all-inclusive. It is intended to identify the major responsibilities and requirements of this job. The incumbents may be requested to perform job-related responsibilities and tasks other than those stated in these specifications. Any essential function or requirement of this class will be evaluated as necessary should an incumbent/applicant be unable to perform the function or requirement due to a disability as defined by the Americans with Disabilities Act (ADA).

I understand and agree that my employment is at will and for no term of definite duration. I also understand and agree that either the City of Noble or myself may terminate my employment relationship at any time.

Employee

Date

The City of Noble is an Equal Opportunity Employer.

*Retain in employee personnel file
Revised 06/27/2018*

NOBLE POLICE DEPARTMENT
Application for Employment
PART TIME FACILITY ACCESS OPERATOR

Noble Police Department
115 N 2nd
PO Box 557
Noble, OK 73068
(Phone) 405-872-9231 (Fax) 405-872-7335

INSTRUCTIONS: PRINT THE ANSWERS TO EACH QUESTION CLEARLY AND COMPLETELY. USE ONLY BLACK INK. APPLICATIONS WHICH ARE NOT COMPLETE WILL NOT BE PROCESSED.

Personal Information

**You must be 18 years of age at time of hire to be eligible for this position*

FULL NAME:		
STREET ADDRESS/CITY/STATE:		
MAILING ADDRESS (IF DIFFERENT):		
HOME PHONE:	CELL PHONE:	EMAIL:
DATE OF BIRTH	AGE	SEX
SOCIAL SECURITY #:	DRIVERS LICENSE #:	DL STATE:
ANY OTHER IDENTIFYING NUMBERS:		

HAVE YOU PREVIOUSLY BEEN EMPLOYED BY THE CITY OF NOBLE? yes no

IF YES, WHEN, AND IN WHAT CAPACITY: _____

HAVE YOU PREVIOUSLY APPLIED WITH THE NOBLE POLICE DEPARTMENT? yes no

IF YES, WHEN? _____

ARE YOU A UNITED STATES CITIZEN? yes no

IF NO, DO YOU HAVE THE RIGHT TO WORK IN THE U.S.? EXPLAIN _____

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME? yes no

IF YES, PLEASE EXPLAIN: _____

The City of Noble is an Equal Opportunity Employer

The City of Noble does not discriminate on the basis of race, color, religion, sex, national origin, marital or veteran status, political affiliation, disability, or any other legally protected status.

HAVE YOU EVER BEEN ARRESTED OR DETAINED BY LAW ENFORCEMENT FOR ANY REASON? yes no

IF YES, EXPLAIN: _____

HAVE YOU EVER SERVED IN THE UNITED STATES MILITARY? yes no

IF YES, LIST BRANCH, DATES OF ENLISTMENT, DATE OF SEPARATION, RANK UPON SEPARATION, TYPE OF DISCHARGE. ALSO, INCLUDE A CURRENT _____

WHAT EXPERIENCE AND/OR TRAINING DO YOU HAVE RELATED TO THIS CAREER?

AT THIS POINT, PLEASE STOP AND READ THE ATTACHED JOB DESCRIPTION FOR PART TIME FACILITY ACCESS OPERATOR.

AFTER REVIEWING THE JOB DUTIES, JOB QUALIFICATIONS, THE WORKING CONDITIONS, AND THE PHYSICAL REQUIRMENTS SECTIONS OF THE JOB DESCRIPTION, ARE YOU ABLE TO PERFORM THEM WITH OR WITHOUT REASONABLE ACCOMMODATION? yes no

INITIAL

PERSONAL REFERENCES

LIST THREE REFERENCES IN THE SPACES BELOW. DO NOT LIST ANY PERSON RELATED BY BLOOD OR MARRIAGE.

NAME:	ADDRESS/CITY/STATE::
HOME PHONE:	CELL OR WORK PHONE:
OCCUPATION:	HOW AQUAINTED AND HOW LONG:

NAME:	ADDRESS/CITY/STATE::
HOME PHONE:	CELL OR WORK PHONE:
OCCUPATION:	HOW AQUAINTED AND HOW LONG:

NAME:	ADDRESS/CITY/STATE::
HOME PHONE:	CELL OR WORK PHONE:
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EMPLOYMENT HISTORY

LIST EMPLOYER INFORMATION FOR THE PAST TEN YEARS IN THE SPACES BELOW. BEGINNING WITH THE CURRENT OR MOST RECENT. IF ADDITIONAL SPACE IS NEEDED ATTACH EXTRA PAGES.

EMPLOYER:	ADDRESS/CITY/STATE:
PHONE:	POSITION HELD:
DATES OF EMPLOYMENT:	SUPERVISOR:
DUTIES AND RESPONSIBILITIES:	
REASON FOR LEAVING:	

EMPLOYER:	ADDRESS/CITY/STATE:
PHONE:	POSITION HELD:
DATES OF EMPLOYMENT:	SUPERVISOR:
DUTIES AND RESPONSIBILITIES:	
REASON FOR LEAVING:	

EMPLOYER:	ADDRESS/CITY/STATE:
PHONE:	POSITION HELD:
DATES OF EMPLOYMENT:	SUPERVISOR:
DUTIES AND RESPONSIBILITIES:	
REASON FOR LEAVING:	

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STATEMENT OF TRUTH AND PERMISSION TO INVESTIGATE

I, _____, CERTIFY THAT THE FACTS GIVEN IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. IN SIGNING THIS STATEMENT, I DO SO WITH THE UNDERSTANDING THAT THE TRUTHFULNESS OF ALL STATEMENTS HEREIN WILL BE INVESTIGATED AND IF FOUND INCORRECT, INCOMPLETE, OR MISLEADING, IT MAY RENDER ME INELIGIBLE FOR EMPLOYMENT WITH THE CITY OF NOBLE.

I HEREBY AUTHORIZE EDUCATIONAL AND OTHER INSTITUTIONS, MY REFERENCES, MY EMPLOYERS, BUSINESS AND PROFESSIONAL ASSOCIATES, DOCTORS WHO HAVE TREATED ME AND HOSPITALS WHERE I HAVE BEEN CONFINED, ALL GOVERNMENT AGENCIES AND INSTRUMENTALITIES AND ALL CONSUMER REPORTING AGENCIES TO RELEASE TO THE CITY OF NOBLE OR ANY OF ITS OFFICERS, ANY INFORMATION, FILES, RECORDS, OR CREDIT REPORTS REQUESTED BY THE CITY OF NOBLE IN CONNECTION WITH THE PROCESSING OF THIS APPLICATION.

SIGNATURE OF APPLICANT

DATE

****MUST BE SIGNED IN PRESENCE OF A NOTARY PUBLIC***

SUBSCRIBED AND SWORN BEFORE ME THIS _____ DAY OF _____, 20_____.

NOTARY SEAL

NOTARY SIGNATURE

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NOBLE POLICE DEPARTMENT

SELF SCREENING QUESTIONNAIRE FOR PART TIME FACILITY ACCESS OPERATOR

1. ARE YOU WILLING TO WORK WEEKEND AND HOLIDAYS?
YES NO
2. ARE YOU WILLING TO ACCEPT LAST MINUTE CHANGES IN YOUR WORK SCHEDULE THAT MIGHT REQUIRE YOU TO CANCEL PERSONAL PLANS?
YES NO
3. ARE YOU WILLING TO BE SUBJECTED TO ABUSIVE OR PROFANE LANGUAGE IN PERSON OR OVER THE TELEPHONE?
YES NO
4. ARE YOU WILLING TO TAKE DIRECTIONS FROM A SUPERVISOR IN FRONT OF YOUR PEERS?
YES NO
5. ARE YOU WILLING TO BE CLOSELY SUPERVISED AND QUESTIONED ABOUT WHY YOU FOLLOWED A CERTAIN COURSE OF ACTION WITHOUT TAKING IT PERSONALLY?
YES NO
6. ARE YOU WILLING AND ABLE TO DEAL CALMLY WITH ANGRY PEOPLE WHEN THE PROBLEM IS NOT YOUR FAULT?
YES NO
7. ARE YOU WILLING TO WORK IN AN ENVIRONMENT WITH NO WINDOWS, LITTLE VENTILATION AND TEMPERATURES THAT MIGHT BE TOO COLD OR TOO HOT FOR YOUR PERSONAL COMFORT?
YES NO
8. IF YOU SMOKE, ARE YOU WILLING TO GO WITHOUT A SMOKING FOR AN ENTIRE SHIFT IF NECESSARY, OR SMOKE ONLY DURING BREAKS?
YES NO
9. ARE YOU WILLING TO WORK UNDER CONSTANT ELECTRONIC SURVEILLANCE?
YES NO

THIS QUESTIONNAIRE IS INTENDED FOR YOUR USE TO HELP YOU DETERMINE WHETHER YOU ARE MAKING THE CORRECT DECISION IN APPLYING FOR THE JOB OF PART TIME FACILITY ACCESS MANAGER FOR THE CITY OF NOBLE.

IF YOU ANSWERED NO TO ANY OF THE QUESTIONS ABOVE, PLEASE RECONSIDER APPLYING FOR THIS POSITION

DATE: _____ SIGNATURE: _____

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