



ROUTT COUNTY COMMUNICATIONS APPLICATION FOR EMPLOYMENT

MEMORANDUM

TO: Applicants for the Communication Specialist I Position
FROM: Human Resources
RE: Application Process

Thank you for your interest in working for the **Communications Department**. Please review the enclosed Specialist I Job Application, Job Facts pages as well as the Job Description before completing the Application and the information needed in the Job Facts pages.

A completed **Communications Application Packet** can be delivered to:

1. Human Resources, 136 6th Street, Steamboat Springs, CO
2. E-mailed to humanresources@co.routt.co.us
3. Faxed to 970-870-5362
4. Mailed to Routt County Human Resources, PO Box 773598, Steamboat Springs, CO 80477-3598.

All application paperwork must be received on or before the due date and time listed on the job opportunity posting. Postmarks will not be accepted.

For questions, assistance or an accommodation please contact Human Resources at: 970-870-5361.

IMPORTANT: Applications must be complete and accompanied by a cover letter and resume to be considered.

Following our review and evaluation of all applications and resumes, we will notify those individuals selected for testing. We expect to conduct testing soon after the closing date.

We appreciate your interest in working for the Communications Department and your desire to serve the community.

ROUTT COUNTY APPLICATION FOR EMPLOYMENT

Routt County, Colorado, ("County") is an equal opportunity employer and political affiliation, age, color, disability, gender identity, genetic information, military or veteran status, national origin, race, religion, sex, sexual orientation or any other applicable status protected by federal, state or local law, are not taken into account in any employment decision. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job related factors.

The County is not a "contractor" as that term is used in Executive Order 11246 (Office of Federal Contract Compliance Programs). However, the County will not discharge or in any other manner discriminate against employees or applicants because they have inquired about, discussed, or disclosed their own pay or the pay of another employee or applicant.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job related information.

Job Applying for: _____ Today's Date _____

Where did you hear about this job? _____

Are you seeking: Full-time Part-time Seasonal employment?

When could you start work? _____

| | | | | |
|---|------------|------------------------------|-----------------------------|----------|
| Last Name | First Name | Middle Name | Telephone Number | |
| Present Address (Physical and Mailing) | | City | State | Zip Code |
| Are you 18 years of age or older? (if you are hired, you may be required to submit proof of age) | | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| If hired, can you furnish proof that you are eligible to work in the U.S.? | | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |

| | | | |
|---|------------------------------|-----------------------------|---------------------|
| Have you ever applied to Routt County before? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | If yes, when? _____ |
| Were you previously employed by Routt County? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | If yes, when? _____ |
| Have you ever been convicted of any law violation? Include any plea of "guilty" or "no contest." Exclude minor traffic violations. | | | |
| | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| If yes, give details _____ (A conviction will not necessarily disqualify an applicant for employment.) | | | |

| | | | |
|---|------------------------------|-----------------------------|--|
| If employed, do you expect to be engaged in any additional business or employment outside of our job? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| If yes give details _____ | | | |

EDUCATION

List Name and Address of Schools

(You may be asked to furnish a transcript as proof that the diploma/degree was obtained)

| Number of Years Completed | Diploma/ Degree Certificate |
|---------------------------------|-----------------------------------|
|---------------------------------|-----------------------------------|

High School or GED: _____

College or University: _____

Subjects Studied: _____

Vocation or Technical: _____

Subjects Studied: _____

SPECIAL SKILLS

What skills or additional training do you have that are related to the job for which you are applying? _____

What machines or equipment can you operate that relate to the job for which you are applying? _____

For Driving Jobs: Do you have a valid driver's license?

Yes

No

Driver's License No.: _____ Class of License: _____ State Licensed In: _____

Have you had your driver's license suspended or revoked in the last 3 years?

Yes

No

If yes, give details: _____

List professional, trade, business or civic activities and offices held. (Exclude labor organizations and memberships which reveal political affiliation, age, color, disability, gender identity, genetic information, military or veteran status, national origin, race, religion, sex, sexual orientation or any other applicable status protected by federal, state or local law or other protected status.)

WORK HISTORY

List names of employers in consecutive order with present employer listed first. Account for all periods of time including military service and periods of unemployment. If self-employed, give firm name and supply business references. **Note:** A job offer may be contingent upon acceptable references from current and former employers.

Name of Employer _____ Supervisor(s) _____

Address _____ Employed from (mo/yr) _____ To(mo/yr) _____

Telephone _____ Hourly Rate - Start \$ _____ Final \$ _____

Title _____ Reason for Leaving _____

Duties: _____

Name of Employer _____ Supervisor(s) _____

Address _____ Employed from (mo/yr) _____ To(mo/yr) _____

Telephone _____ Hourly Rate - Start \$ _____ Final \$ _____

Title _____ Reason for Leaving _____

Duties: _____

Name of Employer _____ Supervisor(s) _____

Address _____ Employed from (mo/yr) _____ To(mo/yr) _____

Telephone _____ Hourly Rate - Start \$ _____ Final \$ _____

Title _____ Reason for Leaving _____

Duties: _____

Name of Employer _____ Supervisor(s) _____

Address _____ Employed from (mo/yr) _____ To(mo/yr) _____

Telephone _____ Hourly Rate - Start \$ _____ Final \$ _____

Title _____ Reason for Leaving _____

Duties: _____

Have you worked or attended school under any other names? Yes No .

If yes, give names: _____

Are you presently employed? Yes No .

If yes, whom do you suggest we contact at your current employment? _____

Have you ever been fired from a job or asked to resign? Yes No .

If yes, please explain: _____

REFERENCES

List three references, not relatives or former employers.

Name

Address

Phone

AFFIDAVIT, CONSENT AND RELEASE

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE COUNTY COMMISSIONERS OF ROUTT COUNTY HAVE THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE COUNTY COMMISSIONERS AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____

ROUTT COUNTY COMMUNICATIONS

JOB FACTS/ACKNOWLEDGEMENTS/AUTHORIZATION

The following are current or projected working conditions and requirements for those employed by Routt County Communications. Please read through this information so you will have a realistic idea of what this job involves.

General Description

The Routt County Communications Department exists to provide public safety communication services for over 30 agencies. The department has two sections: 1) the Administrative Office that conducts the daily functions of payroll, general accounting and administrative functions and; 2) the Communications Center where the majority of the emergency service communication systems and operations are performed.

The Communications Center is the public safety answering point (PSAP) for county-wide Enhanced 9-1-1 emergency phone service. It is also the non-emergency telephone answering point for public safety/service agencies. The Communications Center accesses computerized records from State and Federal computer systems. All functions join together to provide communications coordination of public safety agencies and resources.

As the initial point of contact for all public safety requests in the county, **Communications Specialists** provide the critical interface between citizens in need and the public safety agencies which provide assistance. They monitor phone and radio calls for service, and communicate them to the appropriate persons or agencies.

Communications Supervisors oversee the center's daily operations, supervise Communications Specialists and perform the work of Communications Specialists if needed.

The **Administrative Assistants** provide administrative support to the department and work to maintain systems to manage critical information and coordinate essential administrative functions.

The department is managed by the **Director of Communications**.

Communications Specialists Physical and Mental Job Requirements

- Have adequate hearing and visual acuity, and must be able to speak the English language coherently.
- Be able to work (seated) in a confined environment for eight to twelve hours or more at a time.
- Monitor and operate multiple phones, radios and computer during their entire shift with few or no breaks.
- Wear a lightweight telephone headset.
- Take information from callers who may be excited, incoherent, drunk or hysterical, or who may be abusive and/or use foul language.
- Be patient and remain calm, show empathy, convey reassurance and present a stable demeanor in spite of all factors to the contrary.
- Develop a sense of call interpretation and decision-making/problem-solving skills.
- Be able to condense large amounts of information into sensible, legible written/typed remarks.
- Remember numerous acronyms and codes used for computer entry describing various situations.
- Operate under stressful conditions while demonstrating stability and mental discipline.

Training

There is a 6-month initial review period during which 4 to 6 months of on-the-job training is provided by department employees. Training includes riding with Police, Fire, EMS and other service providers.

Regular testing is part of the training program.

Comprehensive monitoring of on-the-job performance will occur during the training period.

Training requires performance to standard under a variety of conditions with strict adherence to policies and procedures.

Communications Center Trainees work under the direct supervision of a Communications Training Official (CTO). All training is monitored.

Schedule/Staffing

The Communications center must be adequately staffed 24 hours a day, 365 days a year.

Full-time Communications Department employees are required to work a minimum of 40 hours per week.

Communications Center schedules include a variety of shift days and times. Shift length, time span, and number of shifts may vary or change, sometimes on short notice, depending on staffing needs.

Communications Center employees are required to work holidays and weekends as scheduled. Overtime is probable and may be mandatory. Overtime is compensated at the rate of 1.5 times the number of overtime hours worked, either as pay or as compensatory time.

To cover unanticipated absences or emergency situations, Communications Center employees may be required to work on scheduled days or times off, and may be asked to report early or stay late.

Since it is critical that the center is adequately staffed at all times, Communications Center staff must be at their stations and ready to work at the beginning of their assigned shifts.

Paid Leave

All full-time employees are granted 8 hours of sick leave per month.

After the initial review period, employees are eligible to take vacation leave. Vacation leave is accrued at the rate of 6.67 hours per month.

Because Communications must be adequately staffed 24 hours a day, 365 days a year, Communications employees accrue holiday leave for official holidays approved by the Board of County Commissioners.

All full-time employees are given a personal day equivalent to 8 hours annually. The personal day must be used during the calendar year. It does not carry over to the next year.

Meals and Breaks

Communications Center employees eat meals while on duty. Short breaks are available but are not guaranteed. No smoking is allowed in the Communications Department.

Employee Transportation

Since Communications Department employees may be required to work on short notice and/or at unusual times, they must have dependable transportation available at all times.

Statement of Applicant

I have read the Job Facts sheet and understand the minimum requirements expected of me if hired.

Name

(please print)

Signature

Date

ROUTT COUNTY COMMUNICATIONS PRECONDITION OF EMPLOYMENT

The undersigned hereby acknowledges that if hired by Routt County Communications (RCC) as a Communications Specialist, RCC reserves the right to assign any shift or combination of shifts necessary to adequately staff the center throughout the period of employment.

I accept this as a term of employment with the full understanding that by signing this document, I am in no way guaranteed, expressly or implied, employment with Routt County. My signature below indicates my willingness to work under this condition if I am awarded the Communications Specialist position being offered by Routt County Communications.

Name *(please print)*

Signature

Date

ROUTT COUNTY COMMUNICATIONS
AUTHORIZATION FOR RELEASE OF INFORMATION

(For official use only, not to be released to unauthorized persons)

I hereby authorize a review and full disclosure of all records concerning myself to any duly authorized agent of Routt County Communications, whether the said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of information and records, for one year from the date this document is signed, from any or all of the following sources:

1. Any educational institution.
2. Military records including the U.S. Veterans' Administration and Selective Service system.
3. Employment, past employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me.
4. Records and recollection of attorneys-at-law, or other counsel, whether representing me or another person, in any case, either criminal or civil, in which I presently have, or have had, an interest.
5. Any public or private social service agency.
6. Friends, relatives and neighbors.
7. Observations from supervisory personnel.

I understand that any information obtained from a personal history background investigation which is developed directly or indirectly, in whole or in part, as a result of this release authorization, will be considered in determining my suitability for employment by Routt County Communications.

I hereby release any individual or institution, including its officers, employees or related personnel, both individually and collectively, from any and all liability for damages, of whatever kind, which may, at any time, be incurred by me, my family, heirs or associates because of compliance with this authorization.

Exceptions to this blanket authorization (give reasons):

1. _____
2. _____

Date of Birth / Social Security No.

Name *(please print full name)*

Driver's License No. / State

Signature Date

ROUTT COUNTY

POSITION TITLE: Communications Specialist I

FAMILY: Communications

DEPARTMENT: Communications

APPROVED: County Manager

SCALE: Communications Specialist I

FLSA STATUS: Non-Exempt

DATE: February 6, 2015

SUMMARY OF POSITION:

The Communications Specialist I is the entry level Trainee position. Upon the successful completion of the training period and passing the performance test, the Communications Specialist I will be promoted to Communications Specialist II.

Under the direct supervision of a Communications Specialist III, receive calls to the 24-hour communications center, analyze the calls and determine the appropriate response. Notify law enforcement, fire and EMS personnel of requests for service and follow through on all responses. Work with sensitive or classified information and documents.

ESSENTIAL FUNCTIONS – This is a Training position. Under normal situations, the training period will last six (6) months. Training is divided into three phases. The Essential Functions listed below will be taught in the various phases.

- Gather important information from callers quickly and accurately.
- Disseminate information to the proper agencies or personnel quickly and accurately.
- Operate and monitor radio frequencies, to include the console and backup base and emergency mobile backup base. Page on console and backup bases.
- Use and monitor portable radios and other radio equipment.
- Calm hysterical, suicidal, or intoxicated callers as needed, using appropriate techniques learned in training.
- Use security cameras and doors for the communications center.
- Redirect phones and radios for emergency relocation.
- Interpret user agency schedules.
- Enter and extract data from computer-aided mapping and dispatch programs, and from various law enforcement and dispatch record keeping programs.
- File warrants, articles, stolen vehicles, weapons, and missing persons that have been entered into the CCIC/NCIC computer.
- Read and edit incoming and outgoing computerized messages.
- Brief incoming shifts regarding current situations and on-duty personnel.
- Keep status records on up to 20 officers per shift.

OTHER RESPONSIBILITIES:

- Testify in court when required.
- Participate in police, fire and ambulance ride-alongs.
- After successful completion of Emergency Medical Dispatch training, perform emergency medical dispatch as required.
- Assist in cleaning and maintaining the communications center as needed.
- Perform other job-related duties as required.

Specialist I Job Description
Page Two

EDUCATION, TRAINING AND EXPERIENCE LEVEL:

High school diploma or GED.

LICENSES AND CERTIFICATIONS:

Complete CPR certification after hire. Complete Emergency Medical Dispatch Certification prior to promotion to Communications Specialist II. Valid Colorado Drivers License in order to operate a County vehicle.

TECHNICAL SKILLS:

- Must have a clear radio and phone voice.
- Must be able to work with the general public.
- Must have solid computer and typing skills in the use of CAD/RMS system while gathering information via the telephone.
- Must have working knowledge of Microsoft Office products including Outlook, Word, and Excel, as well as navigating a Windows based computer system and the Internet
- Must have the ability to type 3900 keystrokes per hour, using the “CritiCall” pre-employment test.
- Must be able to speak clearly and understand the English language.
- Must have knowledge and understanding of map reading including grids, coordinates and mileage.

WORKING ENVIRONMENT AND PHYSICAL EFFORT:

Work is performed indoors. On occasion, must participate in ride-alongs with police, fire or ambulance personnel. Physical effort required to tolerate high levels of stress and to remain observant in front of computer screens for long periods of time. See accompanying Essential Job Functions and Physical Demands Checklist.

ORGANIZATIONAL RELATIONSHIPS:

Supervised by assigned Communications Specialist III.

COMMUNICATIONS:

Must gather and disseminate information quickly and accurately. Must communicate face to face, over the phone, by computer, fax, radio and teletype.

OTHER:

- Must pass post-job offer, pre-employment hearing and personality tests.
- Must pass a pre-employment criminal background investigation.
- Must have adequate or correctable hearing.
- Vision must be correctable to 20/20.
- Must be able to work holidays and weekends, rotating shifts of up to 12 hours, and overtime as required. Schedule may change on short notice.
- Job requires wearing a headset for up to 12 hours per shift.
- Work is performed in a non-smoking office.

AFFIRMATIVE ACTION INFORMATION

It is the policy of Routt County to provide equal employment opportunity to all qualified applicants for employment without regard to political affiliation, age, color, disability, gender identity, genetic information, military or veteran status, national origin, race, religion, sex, sexual orientation or any other applicable status protected by federal, state or local law. The County is not a "contractor" as that term is used in Executive Order 11246 (Office of Federal Contract Compliance Programs). However, as an Equal Opportunity Employer we invite all applicants to identify themselves as indicated below.

COMPLETION OF THIS FORM IS VOLUNTARY AND IN NO WAY AFFECTS THE DECISION REGARDING YOUR APPLICATION FOR EMPLOYMENT. THIS FORM IS CONFIDENTIAL AND WILL BE MAINTAINED SEPARATELY FROM YOUR APPLICATION FORM.

PLEASE PRINT

Name _____ Date _____
Last First Middle

Position applied for (list only one) _____

Race/Ethnicity (You may mark one or more of the following):

- White** – A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
- American Indian or Alaska Native** – A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- Black or African American** – A person having origins in any of the black racial groups of Africa.
- Asian** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.
- Two or More (Not Hispanic or Latino)** – All persons who identify with more than one of the above five races.
- I elect not to identify.

Sex:

- Male Female
- I elect not to identify.

Signature _____

VETERANS INVITATION TO SELF-IDENTIFY

Routt County is an equal opportunity employer; as such we take action to employ and advance in employment: (1) disabled veterans; (2) recently separated veterans; (3) active duty wartime or campaign badge veterans; and (4) Armed Forces service medal veterans. These classifications are defined as follows:

- A “disabled veteran” is one of the following:
 - A veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs; **or**
 - A person who was discharged or released from active duty because of a service-connected disability.
- A “recently separated veteran” means any veteran during the three-year period beginning on the date of such veteran’s discharge or release from active duty in the U.S. military, ground, naval, or air service.
- An “active duty wartime or campaign badge veteran” means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- An “Armed forces service medal veteran” means a veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

Protected veterans may have additional rights under USERRA – the Uniformed Services Employment and Reemployment Rights Act. In particular, if you were absent from employment in order to perform service in the uniformed service, you may be entitled to be reemployed by your employer in the position you would have obtained with reasonable certainty if not for the absence due to service. For more information, call the U.S. Department of Labor’s Veterans Employment and Training Service (VETS), toll-free, at **1-866-4-USA-DOL**.

VETERANS INVITATION TO SELF-IDENTIFY

Routt County is an Equal Opportunity Employer; as such we invite all applicants to identify themselves as indicated below.

PLEASE PRINT

Name _____ Date _____
Last First Middle

Job Title Applied/Hired for (*list only one*) _____

Signature _____

If you believe you belong to any of the categories of protected veterans listed on page one, please indicate by checking the appropriate box below.

As an Equal Opportunity Employer we request this information in order to measure the effectiveness of our outreach and positive recruitment efforts.

- I identify as one or more of the classifications of protected veterans listed on page one
- I am not a protected veteran
- I decline to self-identify

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information provided will be used only in ways that are not inconsistent with the Vietnam era veterans' readjustment assistance act of 1974, as amended.

The information you submit will be kept confidential, except that (i) supervisors and managers may be informed regarding restrictions on the work or duties of disabled veterans, and regarding necessary accommodations; (ii) first aid and safety personnel may be informed, when and to the extent appropriate, if you have a condition that might require emergency treatment; and (iii) government officials engaged in enforcing laws administered by the office of federal contract compliance programs, or enforcing the Americans with disabilities act, may be informed.

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CONTINUE TO THE NEXT PAGE.

Voluntary Self-Identification of Disability

Form CC-305
OMB Control Number 1250-0005
Expires 1/31/2020
Page 1 of 2

Why are you being asked to complete this form?

Because we do business with the government, we must reach out to, hire, and provide equal opportunity to qualified people with disabilities.¹ To help us measure how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing this form is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way.

If you already work for us, your answer will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our employees to update their information every five years. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

How do I know if I have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition.

Disabilities include, but are not limited to:

- Blindness
- Autism
- Bipolar disorder
- Post-traumatic stress disorder (PTSD)
- Deafness
- Cerebral palsy
- Major depression
- Obsessive compulsive disorder
- Cancer
- HIV/AIDS
- Multiple sclerosis (MS)
- Impairments requiring the use of a wheelchair
- Diabetes
- Schizophrenia
- Missing limbs or partially missing limbs
- Intellectual disability (previously called mental retardation)
- Epilepsy
- Muscular dystrophy

Please check one of the boxes below:

- YES, I HAVE A DISABILITY (or previously had a disability)
- NO, I DON'T HAVE A DISABILITY
- I DON'T WISH TO ANSWER

Your Name

Today's Date

Voluntary Self-Identification of Disability

Form CC-305
OMB Control Number 1250-0005
Expires 1/31/2020
Page 2 of 2

Reasonable Accommodation Notice

Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us if you require a reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or work procedures, providing documents in an alternate format, using a sign language interpreter, or using specialized equipment.

ⁱ Section 503 of the Rehabilitation Act of 1973, as amended. For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at www.dol.gov/ofccp.

PUBLIC BURDEN STATEMENT: According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This survey should take about 5 minutes to complete.