



JOIN OUR TEAM! Now Hiring

COMMUNITY SERVICE OFFICER

West Allis Police Department

EXAMPLES OF DUTIES

- Performs a variety of clerical and administrative duties in support of sworn personnel
- Staffs and monitors the front complaint desk
- Takes walk-in complaints
- Receives, documents, resolves and responds to low priority calls related to abandoned vehicle complaints, animal complaints, found property complaints, and other complaints not requiring the response of a law enforcement officer
- Performs routine vehicle patrol conducting business checks, reporting observed offenses, etc.
- Assists sworn personnel with crash and crime scenes
- Utilizes portable and squad radios
- Provides traffic direction and control for accidents, disabled vehicles and road hazards
- Enforces City ordinances and parking regulations and issues citations accordingly
- Provides security for events including parades, National Night Out, others, etc.
- Assists with booking and monitoring cell block detainees
- Testifies in court
- Fingerprints citizens and applicants
- Operates office computer/applicable software systems to gather information, write incident reports and document activities
- Assists maintenance and mechanics with supply runs
- Delivers and gathers supplies and equipment to and from surrounding agencies and companies
- Maintains prompt, predictable, and regular physical attendance
- Provides truthful and accurate written and verbal communications
- Maintains the ability to competently and credibly testify in court as required
- Performs other duties as assigned

Part-time, 20 hours/week, limited term employment including a combination of day, evening, and weekend hours with flexibility for attending school

This is an unarmed, uniformed civilian position performing work of moderate difficulty supporting basic law enforcement operations in exchange for gaining hands-on practical experience while pursuing post-secondary education in law enforcement. A Community Service Officer (CSO) may be afforded an opportunity to transition to a sworn officer position with our law enforcement agency.

REQUIREMENTS

Training and Experience

- High School diploma or equivalent
- Eighteen (18) years of age or older and enrolled in Criminal Justice, Police Science, or related law-enforcement degree program at an accredited college or university. Candidates must be actively pursuing a career as a sworn law enforcement officer; continued employment is contingent upon maintaining these requirements.
- Possession of valid WI Driver's License; candidates must maintain a good driving record throughout employment
- Ability to keyboard/type at 30 words per minute
- Competent in the use of an office computer/software including, but not limited to, Windows and Microsoft Office applications (Word, Excel, Access, PowerPoint, Outlook & Calendaring), etc.
- Ability to work flexible hours, including nights and weekends (accommodations will be made for attending school)
- Successful passing of a comprehensive police background check, Non-Medical Suitability Evaluation, medical examination and drug screening
- Attain CPR and Basic First Aid certification within 6 months of hire
- Bilingual English/Spanish is desirable
- Completion of National Incident Management System (NIMS) training, ICS-100 and Independent Study-700 within 6 months of hire
- Successful completion of in-house New CSO Training and Field Training
- Successful completion of in-house training for Transaction Information for Management of Enforcement (TIME) certification
- Successful passing of entrance standards (exit standard for pushups) of Wisconsin State Physical Readiness Test

REQUIREMENTS

Knowledge and Skills

Good work ethic, integrity, emotional intelligence, accountability and initiative; skill in listening, critical thinking, problem analysis and problem-solving; good written/verbal communication skills; skill in preparing reports and establishing and maintaining records, accounts, and files; ability to perform basic mathematical computations; ability to learn and interpret official documents, ordinances, State Statutes and regulations; ability to maintain a high level of confidentiality and handle information with discretion; ability to react quickly and effectively in stressful situations; ability to discern emergent from non-emergent situations/incidents; ability to multi-task in a fast-paced environment; ability to remain calm under high-stress situations; ability to quickly adapt to and learn specialized software systems and databases; knowledge of modern office practices, procedures and equipment; skill in monitoring one's own work to ensure quality, accuracy and thoroughness; ability to relate effectively with individuals of varied academic, cultural, and socio-economic backgrounds using tact, diplomacy and courtesy; ability to foster an environment that embraces trust and respect.

Physical Demands

The work requires a superior level of physical conditioning, endurance and agility as follows (refer to Activity Frequencies chart): ability to continuously wear heavy equipment up to approximately 10 lbs. (duty belt, bullet-resistant vest, portable radio, flashlight, pepper spray, etc.); ability to frequently lift objects up to and including 65 lbs.; continuous repetitive motion/ movements including, but not limited to, pulling, pushing, pulling hand-over-hand, running, standing, walking, jumping, climbing, stooping, kneeling, bending, crawling, squatting, reaching, and twisting; continuous sitting and exiting/ entering a police vehicle; continuous operation of a bicycle; continuous high level of mental and visual alertness; high level of hearing acuity; ability to recognize and identify degrees of similarities or differences between characteristics of colors, forms, sounds, and textures associated with job-related objects, materials and tasks; sufficient physical stamina to permit a full day of continuous motor vehicle operation under varying traffic conditions; ability to endure extended working hours; ability to withstand exposure to variable and unfavorable weather and working conditions including, but not limited to, temperature variations and extremes, odors, toxic agents, bodily fluids, communicable diseases, noise, vibrations, electrical current, vehicular traffic and/or dust; ability to continuously focus for long periods of time on projects or while working on computers.

ACTIVITY FREQUENCIES

Continuous	67–100% of workday
Frequent	34–66% of workday
Occasionally	1–33% of workday

This description has been prepared to assist in defining job responsibilities, physical demands, and skills needed. It is not intended as a complete list of job duties, responsibilities, and/or essential functions. This description is not intended to limit or modify the right of any supervisor to assign, direct, and control the work of employees under supervision. The City retains and reserves any or all rights to change, modify, amend, add to or delete from, any section of this document as it deems, in its judgment, to be proper.

SALARY AND BENEFITS

Salary

The hourly rate range is \$11.76 to \$14.71 dependent upon qualifications and experience.

West Allis Resident Incentive Pay: An employee who resides within the City of West Allis shall be granted an additional 5% on top of the established pay for their position.

Benefits

This is a Non-Benefited Position.

EXAMINATION DATA

The first step in the selection process will be a review and evaluation of application materials to identify those candidates who appear to be qualified in terms of training and experience as these relate to the duties and requirements of the position. It is necessary that applicants provide clear and specific information when completing the application materials. The examination will consist of a keyboarding test (PASS/ FAIL) at 30 wpm and an oral interview.

POST-OFFER DRUG TEST

Persons offered employment must pass a post-offer drug test as a condition of employment. The City of West Allis is an at-will employer. Employment may be terminated at any time for any reason.

HOW TO APPLY

Application forms are available online at www.westalliswi.gov/careers, or at the West Allis Police Department, 11301 W. Lincoln Avenue, West Allis, Wisconsin, 53227. Completed applications are to be submitted/returned to the attention of Lt. Michael Kempinski, Police Department. This is a continuous recruitment.

Please note: A job interest card may not be substituted for the application form. Visit our website at www.westalliswi.gov for further information on the City of West Allis.

APPLICATION FOR EMPLOYMENT

Police & Fire Commission
11301 West Lincoln Avenue
West Allis, Wisconsin 53227

This information is for official use only and will not be released to unauthorized persons nor will it be used to discriminate against any applicant.

NOTICE: Application must be typewritten or clearly printed in ink. All questions must be answered, if applicable. If not, indicate N/A (not applicable). Applications, which are incomplete or illegible, will not be considered. If space provided is insufficient for complete answers or you wish to furnish additional information, attach sheets of the same size as this application and number answers to correspond with questions. Any deliberate falsification on this form will result in disqualification of your application or if discovered after employment may be grounds for discharge. Convictions of any offense will not necessarily preclude employment of an applicant unless circumstances substantially relate to the requirements of the position for which you are applying.

AN EQUAL OPPORTUNITY EMPLOYER

POSITION APPLIED FOR	<u>Community Service Officer</u>				
NAME	_____	_____	_____	_____	_____
	(LAST)	(FIRST)	(MIDDLE)		
OTHER NAMES UNDER WHICH YOU HAVE BEEN KNOWN	_____				
DATE OF BIRTH	_____	PLACE OF BIRTH	_____	SS#	_____
ADDRESS	_____	_____	_____	_____	_____
	(NO.)	(STREET)	(CITY)	(STATE)	(ZIP)
LAST FORMER ADDRESS	_____	_____	_____	_____	_____
	(NO.)	(STREET)	(CITY)	(STATE)	(ZIP)
PHONE(HOME/CELL)	_____	(BUSINESS)	_____		
Complete address to which you wish mail sent if different from above:					
ADDRESS	_____	_____	_____	_____	_____
	(NO.)	(STREET)	(CITY)	(STATE)	(ZIP)
PHONE (HOME/CELL)	_____	(BUSINESS)	_____		
EMAIL	_____				
Are you at least 18 years old?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Have you attained your high school diploma or GED equivalent?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Are you currently enrolled at a college or university and pursuing a law enforcement-related degree?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, list program, major or field of study:	_____				
Are you actively pursuing a career as a sworn law enforcement officer?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Are you able to work a minimum of 20 hours/week during the school year?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Are you able to work more than 20 hours/week during extended school breaks (e.g. spring and summer break)?	<input type="checkbox"/> Yes <input type="checkbox"/> No				

1. Do you currently possess a valid, unrestricted Wisconsin Driver License? (Restrictions as to physical reasons only, will not disqualify a person for issuance of an application, but may be a basis for rejection in the medical examination.) Driver's license number _____ Expiration date _____ Date of birth _____ Restriction code(s), if applicable _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2. Provide the following postsecondary school information: A. Name of college or university you are currently attending: _____ B. City/State of college or university: _____ B. Number of credits pursued for the current semester: _____ C. Anticipated graduation date: _____ D. Current cumulative Grade Point Average (as shown on transcript) _____			
3. Provide the following high school information: A. Name of school(s) _____ B. City/State _____ C. Dates attended _____ D. Graduation date _____			
4. Have you ever been dismissed or suspended from a school because of disciplinary action? Date(s) _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Details:			
Final Disposition (list additional on separate sheet if needed):			
5. Are you currently enrolled in a State of Wisconsin Law Enforcement Recruit Academy? Name of Recruit Academy _____ City/State _____ Anticipated graduation date _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6. Are you currently employed either in a full time or part time capacity? Employer(s) _____ Dates of employment _____ Hours per week _____ Job Title _____ May we obtain references from the employer(s) named above? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain exceptions _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7. Have you ever been employed by the City of West Allis? Dates of employment _____ Job Title _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
8. Have you ever served in the armed forces, National Guard or military reserves? Branch of military service _____ Serial # _____ Dates of Active Duty _____ Type of discharge _____ Basis for discharge _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
9. Are you a member of a reserve unit? Service branch _____ Status _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

10. Were you ever court-martialed, tried, or charged, or were you the subject of a summary court, deck court, captain's mast, company punishment, or any other disciplinary action? If yes, how many times? Give details of charges, agency concerned, dates and dispositions		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date				
Details		Final Disposition		
11. Do you have any pending civil cases that may adversely affect job responsibility?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date	County/State	Case #		
Details		Final disposition		
12. Have you ever tried, used or experimented in any way with any illegal controlled substance (i.e. Marijuana, Hashish, LSD, Cocaine, Crack, Methamphetamine, Heroin, K2/Spice, etc.)?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If YES, provide details:				
13. Have you ever tried, used (excluding legally prescribed medications used as directed by a physician) or experimented in any way with any legal controlled and/or non-controlled substance (i.e. Oxycontin, Codeine, Morphine, Methadone, glue sniffing, paint huffing, nitrous oxide, bath salts, etc.)?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If YES, provide details:				
14. Do you have a felony conviction record?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date	Charge	Arresting Agency	City/State	
Details		Final disposition		
15. Do you have a state misdemeanor conviction record for crimes involving moral turpitude? (see list below)		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date	Charge	Arresting Agency	City/State	
Details		Final disposition		
16. Have you ever been arrested for any felony, misdemeanor involving moral turpitude or non-traffic ordinance violation (excluding parking)?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date	Charge	City/State		
Details		Final Disposition		

MISDEMEANORS INVOLVING "MORAL TURPITUDE"

946.74	Aiding inmate to escape from mental institution	948.10	Exposing genitals or pubic area to child for purposes of sexual arousal or sexual gratification	944.21	Obscene performance or writing, picture, sound recording or film
943.37	Alteration of property identification marks	948.22(3)	Failure to support	944.33	Pandering
946.49(1)(a)	Bail jumping	946.32(2)	False Swearing	948.61(2)(a)	Possession of a dangerous weapon on school premises
940.19(1)	Battery	941.13	False fire alarm	944.30	Prostitution
941.23	Carrying a concealed weapon	946.41(2)(a)	False report to law enforcement	49.12	Public assistance fraud
947.06(3)	Cause or participate in an unlawful assembly	946.32(2)	False oath before a notary	946.40	Refusing to aid officer
946.67	Compounding crime	946.69	Falsely assuming to act as public officer or employee	946.41	Resisting an officer
948.40	Contribute to the delinquency of a child	946.70	Falsely impersonating an officer	943.50	Retail Theft
161.41	Controlled substance violations	346.04(3)	Fleeing or attempting to elude an officer	948.09	Sexual intercourse with a child age 16 or older
943.14	Criminal trespass to dwelling	948.60	Furnishing weapons/firearms to minors	940.32	Stalking
947.01	Disorderly Conduct	944.20(2)	Indecent exposure	943.46	Theft of cable services
946.68	Distribution of fictitious court documents	951.08	Instigating fights between animals	943.20(3)(a)	Theft \$500.00 or less
968.075	Domestic Abuse	940.42	Intimidation of witnesses	943.13	Trespass to land
940.34	Duty to aid victim or report crime	943.24	Issue of worthless check under \$500.00		
946.46	Encouraging violation of probation or parole	944.20	Lewd and lascivious behavior		
943.11	Entry into locked vehicle	948.21	Neglecting a child		
943.125	Entry into locked coin box	941.10	Negligent handling of burning material		
948.11(2)(b)	Exposing a child to harmful material	946.45	Negligently allowing escape of prison inmate		

17. Do you have any convictions for Operating While Intoxicated, Operating After Revocation, Operating While Suspended, Operating Without a License, and/or Attempting to Elude an Officer?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date	Charge	Arresting Agency	City/State		
Details					
Final disposition					
18. Have you ever been convicted of any traffic violation, excluding parking and any convictions listed in #17?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date	Charge	Arresting Agency	City/State		
Details					
Final disposition					

Provide three social acquaintances:

Name	# of years Acquainted	Occupation
Home address: _____ City/State/Zip: _____ Telephone #: _____	Business Address: _____ City/State/Zip: _____ Telephone #: _____	
Name	# of years Acquainted	Occupation
Home address: _____ City/State/Zip: _____ Telephone #: _____	Business Address: _____ City/State/Zip: _____ Telephone #: _____	
Name	# of years Acquainted	Occupation
Home address: _____ City/State/Zip: _____ Telephone #: _____	Business Address: _____ City/State/Zip: _____ Telephone #: _____	

Provide three references (not relatives or present employer)

Name	# of years Acquainted	Occupation
Home address: _____ City/State/Zip: _____ Telephone #: _____	Business Address: _____ City/State/Zip: _____ Telephone #: _____	
Name	# of years Acquainted	Occupation
Home address: _____ City/State/Zip: _____ Telephone #: _____	Business Address: _____ City/State/Zip: _____ Telephone #: _____	
Name	# of years Acquainted	Occupation
Home address: _____ City/State/Zip: _____ Telephone #: _____	Business Address: _____ City/State/Zip: _____ Telephone #: _____	

WORK HISTORY/VOLUNTEER EXPERIENCE

Give a complete record of any employment, self-employment, volunteer experience, unemployment, or military service you have had in the past ten years. You may include positions beyond the ten-year period if they are related to the position for which you are applying. Start at the top with your present or most recent job. Indicate any change in job title under the same employer as a separate position. **ALTHOUGH RESUMES ARE WELCOME, THEY MAY NOT BE SUBSTITUTED FOR THE INFORMATION REQUESTED BELOW.**

Employer name and address (if unemployed indicate dates)	Employment dates		Salary		Hours per week
	Begin	End	Begin	End	
	Is this business still active? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Supervisor name and telephone (Where they can be currently contacted)	Position held, duties, reason for leaving				May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer name and address (if unemployed indicate dates)	Employment dates		Salary		Hours per week
	Begin	End	Begin	End	
	Is this business still active? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Supervisor name and telephone (Where they can be currently contacted)	Position held, duties, reason for leaving				May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer name and address (if unemployed indicate dates)	Employment dates		Salary		Hours per week
	Begin	End	Begin	End	
	Is this business still active? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Supervisor name and telephone (Where they can be currently contacted)	Position held, duties, reason for leaving				May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Yes No Were you ever subjected to disciplinary action, including dismissal, in connection with any employment?

If yes, give details: _____

CERTIFICATION AND AGREEMENT

I certify that answers given by me to the foregoing questions and statements are true and complete to the best of my knowledge. I understand and agree that any misstatements or omissions herein subject me to disqualification or dismissal.

I authorize the City of West Allis to make such investigations and inquiries of my employment, character, qualifications, and medical history as may be necessary in arriving at an employment decision. I hereby release all employers, companies, schools, or persons from all liability in responding to such inquiries made in connection with my application.

I further understand that in the event of employment by the City, my classification as a permanent employee depends upon my successfully performing work assigned me during a probationary period, where applicable.

Signature of Applicant

Date Signed

ADDITIONAL INFORMATION

This form MUST be returned with your application materials.

The City of West Allis is an Equal Opportunity/Affirmative Action Employer and does not discriminate against individuals on the basis of race, color, religion, age, marital or veterans' status, sex, national origin, disability, or any other legally protected status.

To help us comply with Federal/State Equal Employment Opportunity record keeping and other legal requirements, please answer the questions below.

Position applied for _____ **Social Security Number** _____

Name _____
(LAST) (FIRST) (MIDDLE)

COMPLETION OF THIS PART OF THE FORM IS VOLUNTARY. The information you provide will not be used in the decision to hire. If you choose not to complete this section, proceed to the bottom of the form for your signature and date.

Sex: Male Female Birthdate _____ / _____ / _____ Age _____
MM / DD / YYYY

Veteran Status: Veteran Non-Veteran Disabled Veteran, Disability Rating _____ %

Ethnic Group:

- Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish Culture or origin, regardless of race.
- White (Not Hispanic or Latino)** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American (Not Hispanic or Latino)** – A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Asian (Not Hispanic or Latino)** – 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.
- American Indian or Alaskan Native (Not Hispanic or Latino)** – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- Two or More Races (Not Hispanic or Latino)** – All persons who identify with more than one of the above five races.

Do you consider yourself to be disabled? Yes No

[A disabled individual is: any person who has a physical or mental impairment which substantially limits one or more of such person's major life activities, or has a record of such impairment or is regarded as having such impairment. Major life activities which might be substantially limited by such impairment include: walking, talking, or otherwise communicating, self-care, socialization, work training, employment, transportation or adaptation to housing (these are examples only).]

If yes, what is the disabling condition? _____

What limitations does this condition impose on major life activities? _____

How did you hear about this job? (Please specify where applicable.)

- Milwaukee Journal/Sentinel Job Service School _____
- Spanish Journal City Cable Channel Community/Minority Organization _____
- City Website Bulletin Board/Walk-In Social Media Source _____
- Interest Card/E-Notify Me Employee Other Website _____
- Job Hotline Word of Mouth Other _____

The above-completed information is true to the best of my knowledge:

(DATE)

(SIGNATURE)