

DeWitt County Board is taking applications for a full time EMA Coordinator. Salary range is \$33,000 - \$40,000. Applications may be picked up at the County Administrator's office in the County Building, 201 W. Washington St., Clinton, IL or by visiting the website at www.dewittcountyill.com under the link "EMA Job Opening". Applications must be received no later than 3:00 p.m. on June 1, 2018 and may be emailed to drentmeister@dewittcountyill.com

.DeWitt County Job Description

Job Title: EMA Coordinator

Department: Emergency Management Agency

Reports To: Public Safety Committee

FLSA Status: Exempt

Prepared By: EMA Coordinator

Prepared Date: December 5, 2016

Approved By: Public Safety Committee

Approved Date: December 8, 2016

SUMMARY

Under administrative direction, has the direct responsibility for emergency planning, organizing, administering staff training, and operating the Emergency Management Agency (EMA) organization.

ESSENTIAL DUTIES AND RESPONSIBILITIES include the following. Other duties may be assigned by the Public Safety Committee.

Requires ability to deal effectively and cooperatively with Federal, State and Local governments, and the general public.

Forecasts operational needs, anticipates costs and develops budget recommendations; maintains department operations within the confines of existing budgetary allotments; attends various meetings, seminars and workshops.

Requires the ability to exercise good judgement in evaluating situations and making decisions.

Requires the ability to communicate effectively both orally and in writing.

Develops an emergency operating center (EOC) facility, with staffing and internal procedures to permit key executives to control operations by local forces under emergency conditions.

Develops local government emergency plans that outline which governmental forces and supporting groups will do what, under various contingencies, by coordinating the planning of all departments and groups with emergency missions, and maintaining such plans in current condition.

Arranges for the exercises to give local officials practice in directing coordinated operations under simulated emergency conditions.

Develops unique skills and capabilities not found in existing departments of government (i.e., development of radiological monitoring, warning and shelter systems, including trained personnel; and assisting police, fire and other operating departments with radiological defense and other training needs.)

Provides or arranges for training needed by the public at large or by subgroups of the public.

Acts as county liaison to Clinton Nuclear Power Station for the purpose of off-site disaster planning, training and exercising plans.

Maintains records of regulated hazardous materials facilities in the county in accordance with Title III, SARA, Emergency Planning and Community Right to Know Act of 1986.

Serves as chairperson of the DeWitt County Local Emergency Planning Committee (LEPC).

Administers the community's disaster management program (i.e. prepares budgets, applies for Federal and State financial or other assistance, administers the grant requirements and expenditures of funding, prepares reports to the county as requested and quarterly reports to the State on local disaster management activities.

Must be a county resident and be available for emergency duty 24 hours a day, 7 days a week, if or when an emergency or disaster occurs.

Performs other duties as required or assigned which are reasonable within the scope of duties enumerated above.

SUPERVISORY RESPONSIBILITIES

The EMA Coordinator supervises the EMA office personnel. Responsible for coordinating the activities of other departments, all EMA volunteers and provides resources as needed.

QUALIFICATIONS To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

EDUCATION and/or EXPERIENCE

Requires thorough experience in disaster management planning or administration.

Requires thorough knowledge of the methods of administrative organizations, planning and supervision.

Requires knowledge of governmental structures and resources.

Requires knowledge of the background and objectives of Federal, State and local disaster emergency management programs.

Requires thorough knowledge of the principles on nonmilitary defense.

Bachelor's Degree from a four year college or university; or one or two years related experience and/or training; or equivalent combination of education and experience.

LANGUAGE SKILLS

Ability to read, analyze, and interpret common scientific and technical journals, financial reports, and legal documents. Ability to respond to common inquiries or complaints from customers, regulatory agencies, or members of the business community. Ability to write speeches and articles for publication that conform to prescribed style and format. Ability to effectively present information to top management, public groups, and/or boards of directors.

MATHEMATICAL SKILLS

Ability to calculate figures and amounts such as discount, interest, commissions, proportions, percentages, area, algebra and geometry.

REASONING ABILITY

Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram or schedule form.

CERTIFICATES, LICENSES, REGISTRATIONS

The EMA Coordinator must be appointed by the DeWitt County Board Chairman. Possession of a valid Illinois Vehicle Operator's License in the appropriate classification required by law.

PHYSICAL DEMANDS/ WORK ENVIRONMENT

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

The work environment is usually office work until there is an emergency or disaster. It can change dramatically when this occurs. During emergencies or disasters, the Coordinator can experience the following conditions:

Wet or humid conditions, work near moving mechanical parts and vehicles; fumes or airborne particles; toxic or caustic chemicals; outdoor weather conditions including extreme cold or heat; and risk of radiation. The noise level in the work environment is typically moderate. Must be physically able to coordinate the response of all disaster activities.

Application for Employment

Please Print

Equal access to programs, services and employment opportunities is available to all persons without regard to age, ancestry, citizenship status, color, physical or mental disability, genetic information, marital status, military status, national origin, race, religion, sex (including pregnancy), sexual orientation, or any other basis protected by federal, state, and/or local law.

In accordance with the Americans with Disabilities Act and/or applicable state and local laws, applicants requiring reasonable accommodations for the application and/or interview process should notify the Human Resources Department. Examples of reasonable accommodations include making a change to the application process; providing written materials in an alternate format such as braille, large print, or audio recording; using a sign language interpreter; using specialized equipment; or modifying testing conditions.

Name: Last _____ First _____ Middle _____ Applicant ID # _____

Address: Street _____ City _____ State _____ ZIP Code _____

Telephone # (____) _____ Cellular/Other Phone # (____) _____ E-mail Address _____

Position(s) applied for _____ Date of application ____/____/____

Referral Source (e.g., Walk-in, Job Posting, Company's Website, etc.) _____

If necessary, best time to call you is _____ : _____ ^{AM}/_{PM}

Home Cellular/Other

May we contact you at work? Yes No

If yes, work number and best time to call: _____ : _____ ^{AM}/_{PM}

If you are under 18 and it is required, can you furnish a work permit?..... N/A Yes No

If no, please explain: _____

Have you submitted an application here before? Yes No

If yes, give date(s) and position(s): _____

Have you ever been employed here before? Yes No

If yes, give dates: From ____/____/____ To ____/____/____

Is this application a request for reemployment following an extended military leave of absence from this company?..... Yes No

If yes, additional information may be requested.

Are you lawfully authorized to work in the United States?..... Yes No

Date available for work..... ____/____/____

What is your desired salary range or hourly rate of pay?

\$ _____ Per _____

Type of employment desired: Full-Time Part-Time Educational Co-Op Seasonal Temporary

Will you relocate if job requires it? Yes No

Will you travel if job requires it? Yes No

If they have been explained to you, are you able to meet the attendance requirements of the position? N/A Yes No

Will you work overtime if required?..... Yes No

If no, please explain: _____

Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)?

This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

Yes No Need more information about the job's "essential functions" to respond

Driver's license number required if driving may be required in the job for which you are applying: _____ State _____

Have you ever been bonded? Yes No

Have you entered into an agreement with any former employer or other party (such as a noncompetition agreement) that might, in any way, restrict your ability to work for our company?..... Yes No

If yes, please explain: _____

Employment History

Starting with your most recent employer, provide the following information.

Employer	Telephone # ()	Dates employed: Month / Year to Month / Year
Street address	City State	Compensation (Starting)
Starting job title/final job title		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Commission/Bonus/Other Compensation \$
Why did you leave?	E-mail:	Compensation (Final)
Summarize the type of work performed and job responsibilities.		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
What did you like most about your position?		Commission/Bonus/Other Compensation \$
What were the things you liked least about the position?		

Employer	Telephone # ()	Dates employed: Month / Year to Month / Year
Street address	City State	Compensation (Starting)
Starting job title/final job title		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Commission/Bonus/Other Compensation \$
Why did you leave?	E-mail:	Compensation (Final)
Summarize the type of work performed and job responsibilities.		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
What did you like most about your position?		Commission/Bonus/Other Compensation \$
What were the things you liked least about the position?		

Employer	Telephone # ()	Dates employed: Month / Year to Month / Year
Street address	City State	Compensation (Starting)
Starting job title/final job title		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Commission/Bonus/Other Compensation \$
Why did you leave?	E-mail:	Compensation (Final)
Summarize the type of work performed and job responsibilities.		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
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Employer	Telephone # ()	Dates employed: Month / Year to Month / Year
Street address	City State	Compensation (Starting)
Starting job title/final job title		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Commission/Bonus/Other Compensation \$
Why did you leave?	E-mail:	Compensation (Final)
Summarize the type of work performed and job responsibilities.		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
What did you like most about your position?		Commission/Bonus/Other Compensation \$
What were the things you liked least about the position?		

Employment History (continued)

Explain any gaps in your employment, other than those due to personal illness, injury, or disability. _____

If not addressed on previous page, have you ever been fired or asked to resign from a job?..... Yes No

If yes, please explain: _____

Skills and Qualifications

Summarize any special training, skills, languages, licenses, and/or certificates that may assist you in performing the position for which you are applying:

Computer Skills (Include software titles and level of experience, such as basic, intermediate, or advanced.)

Word Processing _____ Level: _____ Internet _____ Level: _____

Spreadsheet _____ Level: _____ Other _____ Level: _____

Presentation _____ Level: _____ Other _____ Level: _____

E-mail _____ Level: _____ Other _____ Level: _____

Educational Background

Starting with your most recent school attended, provide the following information.

School (include City and State)	# of Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		

References

List names and telephone numbers of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

Name	Title	Relationship to You	Telephone	E-mail	# of Years Known
			()		
			()		
			()		

Related Information

When answering these questions, please exclude any information that would reveal age, ancestry, citizenship status, color, physical or mental disability, genetic information, marital status, military status, national origin, race, religion, sex (including pregnancy), sexual orientation, or other similarly protected status.

To what job-related organizations (professional, trade, etc.) do you belong? _____

List special accomplishments, publications, awards, etc. _____

List any relevant volunteer work. _____

Is there any other job-related information you want us to know about you? _____

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete, and correct.

I expressly authorize, without reservation, the employer, its representatives, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees, or representatives, for seeking, gathering, and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state, or federal law.

I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that reasonable safeguards will be taken to protect all personal information provided or obtained in conjunction with this application for employment. My personal information may be shared with the employer's affiliate(s) and third parties engaged by the employer to perform services for the employer. Any personal information shared with an affiliate or third party is to be used solely to perform the services requested by the employer.

This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her age, ancestry, citizenship status, color, physical or mental disability, genetic information, marital status, military status, national origin, race, religion, sex (including pregnancy), sexual orientation, or any other protected status under applicable federal, state, or local law.

I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____

Date / / _____



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