

City of Muscle Shoals

2010 Avalon Avenue • Muscle Shoals, Alabama 35661
Post Office Box 2624 • Muscle Shoals, Alabama 35662-2624
(256) 383-5675 • Fax: (256) 386-9201 • www.cityofmuscleshoals.com

Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Instructions: Complete all information. Please complete insert if enclosed. Be sure to sign and date the application. MUST use ink on this application.

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

Last Name		First Name		Middle Name	
Address	Street	City	State	Zip Code	
Telephone Number(s)			Social Security Number (Optional)		
E-Mail Address					

POSITION APPLYING FOR: _____

May we contact your present employer? Yes No

Have you filed an application or been employed here before? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? (Proof of citizenship or immigration status will be required upon employment.) Yes No

Are you available to work? Full time Part time On Shifts

Are any of your relatives employed with the City of Muscle Shoals? Yes No

If yes, list name(s) _____

Have you been convicted of a felony? Yes No

If yes, please explain _____

Have you ever been convicted or arrested for any reason other than a minor traffic violation? Yes No

Are you on lay-off and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Education

	Name of School	City and State	Year Graduated	Course of Study	Course or Degree
High School					
College					
College					
Vocational					
Other (Specify)					

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Give name, address and phone number of three references not related to you.

Name	Address and Phone Numbers

Employment Experience

THIS SECTION MUST BE COMPLETED EVEN WITH RESUME ATTACHED.

List each job held. Start with your present or last job. Include military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disability, or other protected status.

1	Current or Last Employer	Dates Employed		Work Performed
	Telephone Number(s)	From	To	
	Job Title	Salary (Optional)		
	Supervisor (Include first and last name)			
	Reason for Leaving			
2	Previous Employer	Dates Employed		Work Performed
	Telephone Number(s)	From	To	
	Job Title	Salary (Optional)		
	Supervisor (Include first and last name)			
	Reason for Leaving			
3	Previous Employer	Dates Employed		Work Performed
	Telephone Number(s)	From	To	
	Job Title	Salary (Optional)		
	Supervisor (Include first and last name)			
	Reason for Leaving			
4	Previous Employer	Dates Employed		Work Performed
	Telephone Number(s)	From	To	
	Job Title	Salary (Optional)		
	Supervisor (Include first and last name)			
	Reason for Leaving			

Agreement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize you to make such investigations and inquiries of all statements contained in this application as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the City of Muscle Shoals.

Signature of Applicant

Date

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

FOR HUMAN RESOURCE DEPARTMENT USE ONLY - DO NOT WRITE BELOW

Initial

Complete
Incomplete

Scheduled Agility Test

Date: _____ Time: _____

Scheduled Interview

Date: _____ Time: _____

Additional Interview

Date: _____ Time: _____

Notes:

Employed Yes No

Date of Employment _____

QUESTIONNAIRE FOR CORRECTIONS OFFICER APPLICANT
(PLEASE RETURN WITH YOUR APPLICATION)

Do you understand that any offer of employment is conditional upon a physician's certification of your fitness for duty based upon job-related criteria?

Yes _____ No _____

Do you understand that any offer of employment is conditional upon a successful completion of controlled substance testing?

Yes _____ No _____

A VALID DRIVER LICENSE IS REQUIRED.

Do you meet this requirement?

Yes _____ No _____

PLEASE INCLUDE DRIVER LICENSE NUMBER AND EXPIRATION DATE IN THE SPACES INDICATED BELOW:

DRIVER LICENSE NUMBER _____

EXPIRATION DATE _____

HIGH SCHOOL DIPLOMA OR GED IS REQUIRED.

Do you meet this requirement?

Yes _____ No _____

PLEASE ATTACH COPY OF YOUR DIPLOMA OR GED CERTIFICATE WITH APPLICATION.(COLLEGE DIPLOMA WILL BE ACCEPTED.) ALSO, COPY OF HIGH SCHOOL OR COLLEGE TRANSCRIPT IS ACCEPTED.

Is any member of your or your spouse's immediate family (defined by the Civil Service Board's Personnel Policies and Procedures as spouse, parent, child, brother, sister, grandparent, grandchild, aunt, uncle, nephew, niece) employed in the department for which you desire consideration?

Yes _____ No _____

If Yes, please name: _____

I certify that answers given herein are true and correct to the best of my ability. I also understand, that in the event I am employed, that false or misleading information given on this form may result in my discharge.

Signature of Applicant

Date

BACKGROUND REPORT DISCLOSURE STATEMENT

Please read the information on this form carefully. It describes your rights as a consumer.

City of Muscle Shoals uses Risk Mitigation Services, Inc. to conduct background investigations as part of its employment process. Such background investigations are covered by Section 603 of the federal Fair Credit Reporting Act (FCRA) and are termed "consumer reports" and/or "investigative consumer reports". Risk Mitigation Services, Inc. is a "Consumer Reporting Agency" (CRA) covered by the FCRA. City of Muscle Shoals uses the background reports provided by Risk Mitigation Services, Inc. for employment, continued employment, volunteer status, or promotion purposes. City of Muscle Shoals will procure the report from:

Risk Mitigation Services, Inc.,
PO Box 2129
Muscle Shoals, AL 35662
Tel. 866-383-1180
www.riskmitigation.us

Under Section 603 of the FCRA, a consumer report or consumer investigative report is an independent investigation of your background, which may include information regarding your "character, general reputation, personal characteristics, or mode of living." The background report that Risk Mitigation Services, Inc. provides may contain information about your driving record, civil and criminal legal and court records, criminal conviction records, education, professional or employment-related credentials, credit history, identity, locations and addresses where you have lived, Social Security number, education history, previous employment, and other public records.

The FCRA requires that if City of Muscle Shoals denies you employment, continued employment, volunteer status, or promotion as a result of information contained in a background report, you must be provided with a copy of the report, a summary of your rights under the FCRA, the name, address, and telephone number of the consumer reporting agency that furnished the report and given a reasonable opportunity to respond to disputed information contained in the report.

I hereby consent to your obtaining the above information from Risk Mitigation Services, Inc.

First Name (please print)	Middle Name	Last name
Signature		Date

Social Security Number: _____ *Date of Birth: _____

Driver's License Number: _____ DL State: _____

Daytime Telephone Number: _____

International Applicants

International Government ID: _____
ID# Country of Origin

International Address: _____
Physical Address

City/Province/Country

*Without this information, we will be unable to properly identify you in the event we find adverse information during the course of the background check.

**IMPORTANT — PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION
ACKNOWLEDGMENT AND AUTHORIZATION**

USA Applicants Only: I acknowledge receipt of the BACKGROUND CHECK DISCLOSURE STATEMENT and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents.

Applicants with Personal Data from Outside the USA Only: I acknowledge receipt of the DATA PRIVACY NOTICE and certify that I have read and understand the document.

I hereby freely authorize release to City of Muscle Shoals of consumer reports and/or investigative consumer reports as part of its evaluation of my application for employment, continued employment, or promotion. I also authorize disclosure to City of Muscle Shoals and/or to Risk Mitigation Services, Inc. or its agents information that City of Muscle Shoals deems pertinent to its consideration of my application for employment, continued employment, or promotion, including but not limited to my employment history, earning history, education (transcripts), motor vehicle driving licensure and record, criminal history, credit history, public records, records of administrative adjudications, by any individual, corporation or other private or public entity, including without limitation the following: employers; learning institutions, including colleges and universities; law enforcement agencies; federal, state and local courts; the military; motor vehicle records agencies; credit bureaus, and other applicable sources. These reports may contain information regarding your use of social media, the content that you contribute to social media, and any other publicly-available information about you on the internet. Social media include, but are not limited to, social networking websites (e.g., Facebook, MySpace), professional networking websites (e.g., LinkedIn), video-sharing websites (e.g., YouTube), image-sharing websites (e.g., Flickr), blogs, wikis, virtual worlds, and personal websites.

In accordance with the host nation's laws and the laws applicable to me depending on my location regarding the release of information, I authorize the release and transmittal of information from any country to the above listed parties, their clients, and/or their agents or vendors located in any country, including countries outside the European Union that may have a different level of data protection or inadequate data protection laws as defined by the European Commission.

I understand this authorization will apply throughout my employment status to the extent permitted by law, unless revoked or canceled by sending a signed revocation letter or statement to City of Muscle Shoals. I understand to the extent allowed by law, information contained in my job application or that I have otherwise disclosed before, during, or after my employment, if any, may be used to obtain consumer reports and/or investigative consumer reports.

I understand that providing false information or omitting material information on my employment application materials or as part of the employment process is grounds for rejecting employment, or terminating employment, whenever discovered.

This Authorization form, in original, faxed, photocopied, or electronic form, will be valid for any reports that City of Muscle Shoals may request. The following is my true and complete legal name and all information is true and correct to the best of my knowledge.

New York Applicants Only: Upon request, you will be informed whether or not a consumer report was requested by Company, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by Company by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of ARTICLE 23-A OF THE NEW YORK CORRECTION LAW.

New York City Applicants Only: You acknowledge and authorize Company to provide any notices required by federal, state or local law to you at the address(es) and/or email address(es) you provided to the Employer.

Minnesota and Oklahoma Applicants Only: Please check this box, if you would like to receive a copy of a consumer report, if one is obtained by Company.

Washington State Applicants Only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Printed Name: _____

Signature: _____ Date: _____

MUSCLE SHOALS POLICE DEPARTMENT
TATTOO / BODY MODIFICATION POLICY

Employees of the, Muscle Shoals Police Department must comply with department policy governing tattoos and body modification. Policy Compliance may directly impact eligibility for employment; therefore, applicants considered for employment are required to review the policy and complete this form.

POLICY:

- Tattoos on the **hands, face, neck and scalp are prohibited.**
- Tattoos that are potentially offensive to the community, racist, sexism or sexually suggestive or explicit, obscenity or profane, gang or drug related or political in nature are prohibited.
- Exception: the visible tattoo must not be potentially offensive to the community, as determined by the Chief of Police.
- Exceptions to the tattoo policy must be authorized by the Chief of Police.

Body Modification and Body piercing:

Body modifications visible while on duty are prohibited. Body modifications include, but are not limited to:

1. Tongue splitting or bifurcation;
2. Abnormal shaping of the ears, eyes or nose;
3. Gauging or gradually increasing the radius of a surgically induced opening in the ear flesh in area such as the ear lobes or lips and branding or scarification.

Body modifications shall not include those procedures medically necessitated by illness, deformity or injury, when performed by a licensed medical professional.

APPLICANT: Do you have any tattoos? O Yes O No

IF YOU ANSWERED YES, PLEASE CHECK ALL STATEMENTS THAT APPLY TO YOU *AND PROVIDE NECESSARY DETAILS:*

- o I do not have any tattoos on my hands, face, neck or scalp.
- o I have one or more tattoos that, pursuant to the City's tattoo policy, do not impact my eligibility for employment. I understand that, if I am employed in the Police Department.
- o I have one or more tattoos that may be considered offensive to the community. I am providing the following description for evaluation. This description includes the image(s) depicted by the tattoo(s), the size(s) of the tattoo(s), and the location(s) of the tattoo(s) on my body:
- o I, the undersigned applicant, acknowledge: 1) I have read the tattoo policy; 2) I have properly disclosed the information required; and 3) I understand that failure to answer truthfully will make me ineligible for any future City employment or, if hired, could result in termination from employment.

Applicant Signature
Date:

CITY OF MUSCLE SHOALS

JOB DESCRIPTION

Job Title: Corrections Officer

Department: Police Department

FLSA:

Grade:

Safety Sensitive Job: Yes

Security Sensitive Job: No

Job Description Prepared: November 2021

Note: Statements included in this description are intended to reflect in general the duties and responsibilities of this job 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: Shift supervisor

Subordinate Staff: None

Internal Contacts: All City Departments

External Contacts: General Public; Bonding Companies; Court Officers; Judges; Probation and Parole Officers; Court Referral Officers; Alabama Department of Human Resources (DHR); Alabama Department of Corrections (DOC); Alabama Department of Public Health (DPH); Lawyers; Medical Facilities; Prisoner Transport Services; Contractors; Vendors

Job Summary

Under the supervision of the shift supervisor, the employee serves as a correctional officer providing security and operational support for the City jail. Employee completes inmate booking, explains rules and regulations, and issues inmate supplies. Employee enters information into jail management software, monitors inmate activities, and transports inmates to court proceedings. The employee maintains a safe and secure environment within the confines of the facility for an average of eight (8) to ten (10) inmates. Work is performed in accordance with established rules, regulations, and instructions from superior officers, and work is reviewed upon completion. This job is considered safety-sensitive and is subject to pre-employment background check and random drug screens.

Essential Functions

ESSENTIAL FUNCTIONS: The following list was developed through a job analysis; however, it is not exhaustive and other duties may be required and assigned. A person with a disability which is covered by the Americans with Disabilities Act (ADA) must be able to perform the essential functions of the job unaided or with the assistance of a reasonable accommodation.

ESSENTIAL FUNCTION: Corrections Unit Operations. Follows established protocol to maintain a safe and secure jail environment. Maintains control of inmates according to standard operating procedures.

1. Places arrestees in custody; completes formal booking procedure as required.
2. Assists in the application of bail within departmental guidelines.
3. Assists with transfer to another jurisdictional agency as required.
4. Searches inmates for weapons and contraband, seizing evidence as required.
5. Completes medical history questionnaires.
6. Completes jail card including address, telephone number, driver license number, employer, next-of-kin, etc.
7. Issues jail clothing, sheets, blanket, and mattress upon entrance of a new inmate.
8. Explains jail rules, regulations, and restrictions to inmates.
9. Ensures inmate has the opportunity for telephone communication after booking.
10. Escorts nurse around facility during routine visits for inmate health care, as directed.
11. Witnesses breathalyzer tests administered to inmates as required; administers random drug tests.
12. Ensures meals are obtained for inmates and are distributed within established policy and health standards and regulations; maintains strict utensil inventory at beginning and end of mealtimes.
13. Guards and monitors inmates with an emphasis on well-being and security.
14. Transports inmates to medical appointments, court, and related facilities.
15. Reports to supervisor any illness of inmates, unusual circumstances, unsafe conditions, or other matters that pertain to inmates or jail.
16. Maintains the security of the jail facility by checking all locks, doors, and windows; accounts for all keys and personal cardkey for electronic locks; makes scheduled floor checks of all cellblocks and inmates.
17. Conducts security checks of fire escapes and accesses; conducts security checks of exterior premises including parking lot; notifies supervisor or non-duty patrol officers of any persons on the premises without authorization or that appear to pose a threat to the facility.

18. Provides security during visitation hours, transfers to medical facilities, extradition transfer, religious services, lawyer interview, bail applications, etc.
19. Investigates and reports issues between prisoners; isolates or segregates as warranted to protect inmates and jail staff; prepares a written report of all incidents involving force.
20. Intervenes during physical altercations involving inmates.
21. Makes recommendations to supervisor for trustee assignments; supervises work details; reports any issues or deficiencies in writing.
22. Identifies and searches all visitors and trustees entering and leaving the jail.
23. Conducts visitations per established policy; controls and supervises visitors regarding contraband, dangerous instruments, and weapon introduction within the secure area of the facility; ensures visitors comply with all regulations and that criminal offenders are prohibited from visiting.
24. Conducts cell-block shakedowns and inspections for the purpose of contraband seizure according to established protocol.
25. Conducts rollcall of all prisoners at the start and end of each shift.
26. Delivers all inmate correspondence to and from the courts and officials, maintaining confidentiality of contents.
27. Monitors inmates in the exercise yard.
28. Assists during periodic inspection of the jail facility by representatives of the Grand Jury, Department of Corrections, Department of Public Health, State Fire Marshal, etc.
29. Provides transport of inmates to court as needed; listens to judge's ruling and comments; takes notes.

ESSENTIAL FUNCTION: Jail Operations Support. Provides support to ensure appropriate and required jail processes are accomplished.

1. Completes booking reports, fingerprint cards, and medical screening forms; takes photographs, completes computer data entry, and makes appropriate cell assignment for prisoners.
2. Inventories personal property, jewelry, monies, etc. for inmates; receipts as required; returns property to individuals upon release and gathers signature for verification of inventory.
3. Maintains logs of all jail visitors and ensures order during visitations.
4. Maintains inmate history, disciplinary reports, illness, and various other records concerning inmates.
5. Serves indictments and warrants in accordance with established procedures for in-jail arrests or additional charges or holds.
6. Makes written execution upon service of warrant and returns to issuing authority.
7. Locates and transfers records for the court; ensures confidentiality of internal business records per departmental procedure.

8. Makes frequent inventories of needed supplies; maintains forms and printed materials in sufficient quantity to accommodate continuous use; notifies supervisor deficiencies and needs.
9. Maintains work release sign-in sheet; reports any delinquent or missing participant to supervisor and communications personnel without delay.
10. Maintains roster of trustees; maintains photographs and classification restrictions.
11. Maintains computerized daily log of jail activities; records details of any incidences, notes all individuals who enter and exit facility, etc.
12. Completes incident and disciplinary reports related to inmates.

NON-ESSENTIAL FUNCTION:

Performs other job-related duties as assigned or required.

Knowledge, Skills and Abilities

(*Can be acquired on the job)

1. *Knowledge of City and Departmental policies and procedures.
1. *Knowledge of City, state, and federal statutes and laws.
2. *Knowledge of the criminal justice system and procedures.
3. *Knowledge of criminal law, court procedures, and liability.
4. *Knowledge of modern, approved practices and procedures of jail-related processes.
5. *Knowledge of prisoner/inmate handling techniques and procedures.
6. Knowledge of first aid and cardio-pulmonary resuscitation (CPR).
7. Communication skills to effectively communicate internally and externally, both orally and in writing.
8. Verbal skills to effectively communicate with co-workers, supervisors, inmates, and the public.
9. Writing skills to develop professional letters, reports, and other materials using correct English, grammar, punctuation, and spelling.
10. Listening skills to take accurate statements.
11. Reading skills to understand and interpret guidelines and regulations.
12. Math skills to complete basic calculations (additions, subtraction multiply, and divide).
13. Computer skills to effectively enter inmate information and utilize jail management software.
14. Driving skills to operate a vehicle properly and safely under adverse conditions.
15. Ability to defend oneself from unruly and disorderly individuals.
16. Ability to work under supervision.
17. Ability to utilize approved methods of defense such as Tasers and pepper spray.
18. Ability to read and comprehend a variety of legal and procedural documentation, directions, instructions, methods, and procedures.

19. Ability to use computers and office productivity software.
20. Ability to handle stressful situations.
21. Ability to work under pressure and use good judgment.
22. Ability to listen and have patience and compassion.
23. Ability to prioritize work projects.
24. Ability to use multi-line telephones and two-way communication devices.
25. Ability to multi-task and organize files.
26. Ability to stay awake and alert for long periods of time overseeing inmates.
27. Ability to pay attention to detail when completing reports.
28. Ability to subdue belligerent and hostile individuals.
29. Ability to use non-lethal personnel control equipment.
30. Ability to use personal protective equipment (PPE).
31. Ability to drive and use safe driving methods.

Minimum Qualifications

1. Possess a high school diploma or GED.
2. Experience as a corrections officer or in law enforcement is desired; or any combination of education, training and experience that demonstrates the above listed knowledge, skills, and abilities commensurate with the requirements of this job will be considered.
3. Possess a current and valid driver's license; must be insurable.
4. Ability to obtain and maintain Jail Management certification within one (1) year of employment.
5. Ability to obtain and maintain first aid and cardio-pulmonary resuscitation (CPR) certification.
6. Ability to complete continuing education and training classes.
7. Ability to obtain and maintain Taser and oleoresin capsicum (O.C. or pepper spray) spray certification, as required.
8. Ability to be on call 24/7 and work non-standard hours.
9. Ability to travel in the performance of duty related work. Travel may include overnights.
10. Ability to pass a pre-employment background check and random drug screens.

Physical Demands

The work requires considerable and strenuous physical exertion such as frequent climbing of tall ladders, lifting heavy objects over 50 lbs., crouching, or crawling in restricted areas, and defending oneself or others from physical attack.

Work Environment

The work environment involves high risks with exposure to potentially dangerous situations or unusual environmental stress which require a range of safety and other precautions, e.g. working at great heights under extreme weather conditions, subject to

physical attack or mob conditions, or similar situations where conditions cannot be controlled.

Approval


Name


Title


Date