



## **Police Records Clerk**

*This job description is intended to present a descriptive list of the range of duties performed by employee(s) in this municipality and is not intended to reflect all duties performed within the job.*

**SUPERVISOR:** Chief of Police or Assistant Chief of Police

**SUPERVISE:** None

### **SUMMARY DESCRIPTION**

Transcribes police reports and interview recordings; reviews and enters officer reports into the computer system; maintains police record files; prepares reports and correspondence. Receives the public by phone and in person to provide information and copies of documents as required.

### **EXAMPLES OF WORK PERFORMED**

**ESSENTIAL FUNCTIONS:** *The following examples of work are illustrative only and are not intended to be all inclusive.*

Transcribes and prepares officer reports and records of interviews from audio recordings.

Prepares correspondence, letters, memos, and other departmental documents in final format.  
Enters report information into computer system.

establishes and maintains an accurate file system for official documents, records, reports, forms, and correspondence which may be of a confidential nature.

Handles all information in a professional manner and maintains the confidentiality of all records.

Operates standard office equipment in the performance of job duties, i.e. fax machines, copier, personal computer, calculator, dictation machine, etc.

Uses various computer software to create text reports, spreadsheets, graphs, photos, etc.  
Takes requests from the public in person and by telephone for information and copies of documents as required.

Establishes and maintains effective working relationships with the general public, governmental officials, supervisors and co-workers.

Performs related duties as required

### **QUALIFICATIONS**

*The following generally describes the knowledge and ability required to enter the job and/or be learned within a short period of time in order to successfully perform the assigned duties.*

**Knowledge of:**

- Transcribing and preparing officer reports and records of interviews from audio recordings.
- Routine office procedures and standard clerical techniques.

**Ability to:**

Accurately hear and transcribe recorded material.

- Perform input and retrieval functions utilizing a variety of computer programs and software pertaining to the duties performed.
- Type accurately using a typewriter and personal computer.
- Perform job duties with thoroughness, accuracy and attention to detail.
- Prepare and maintain departmental records and documents.
- Maintain the confidentiality of appropriate communications, documents and transactions.
- Plan and organize a personal work schedule, set priorities and meet deadlines.
- Perform job duties efficiently while managing frequent interruptions.
- Operate standard office equipment, i.e. fax machine, copier, personal computer, calculator, etc.
- Understand and follow both oral and written instructions.
- Communicate effectively in English, both verbally and in writing.
- Establish and maintain effective working relationships with the public, other employees, other governmental agencies and municipal officials.
- Deal with the general public in a courteous and tactful manner.

**PHYSICAL DEMANDS AND WORKING ENVIRONMENT**

*The conditions herein 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 job functions.*

**Environment:** Work is generally performed indoors in an office setting and requires some physical activity, including extended periods of sitting, standing, walking, kneeling, bending, crouching, reaching, stooping and climbing. An incumbent must have the ability to transport themselves to and from various locations throughout City Hall.

**Physical:** The physical demands and work environment characteristics 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. An incumbent must have the ability to frequently lift, push, pull or carry equipment, supplies and other materials weighing up to 10 lbs., and to occasionally lift, push, pull or carry equipment.

**EDUCATION AND EXPERIENCE**

*Any combination of education and experience that would likely provide the required knowledge and ability is qualifying. A typical way to obtain the knowledge and abilities would be:*

**Education/Training:**

Graduation from high school or equivalent GED, or any equivalent combination of education, training and experience.

Must have experience in computer software, word processing and spreadsheet applications.

Must have experience in a position requiring completion of multiple tasks at one time.

## CITY OF WAHOO, NEBRASKA

This provides an outline of available benefits for **Regular Part-time** employees as of January 1, 2018. Further details are available in the City of Wahoo Personnel Policy Manual and insurance and retirement plan documents.

### **Salaries:**

Salary scales have been established for each job description. Annual performance evaluations are conducted for all employees.

**Vacation:** Regular Part-time (year-round) employees earn one week of vacation annually, after the anniversary date.

Vacation is earned based on the number of hours normally worked during one week. (If you usually work 22 hours per week, you earn 22 hours of vacation time; if you normally work 10 hours per week, you earn 10 hours.) Accrued vacation is paid out at termination.

**Holidays:** Eleven holidays are observed by the City of Wahoo: New Year's Day, President's Day, Memorial Day, Independence Day, Labor Day, Veteran's Day, Thanksgiving Day, the day after Thanksgiving, Christmas Eve Day, and Christmas Day. A regular part-time employee normally scheduled to work on a day which is an observed holiday, is entitled to receive holiday pay based on the normal scheduled hours of work.

**Floating Holiday:** One "floating holiday", based on the number of hours normally worked in a day, is earned each January. A Floating Holiday is used like a vacation day.

**Personal Leave:** Part-time employees do not earn Personal Leave.

**Overtime:** Overtime is calculated after 40 hours worked in any one week (includes vacation or holiday leave taken during the week) and is paid at 1 ½ times regular hourly wage.

### **RETIREMENT PLAN:**

Regular Part-time employees who work at least 20 hours per week are eligible to participate in the retirement plan. The City of Wahoo provides a defined contribution retirement plan for its employees. Participating employees contribute 6% and the City contributes a matching 6%. Employees select investment options from list of available funds. Eligible to enroll after six months of employment. Vesting in the City's contribution to retirement funds occurs as follows:

After 1 year of service	0%
2	20%
3	40%
4	60%
5	80%
6	100%

## **INSURANCE :**

Part-time employees who regularly work less than 30 hours per week do not receive insurance benefits.

Those who work 30 hours per week or more regularly are eligible for group health insurance through Blue Cross Blue Shield. Benefit information provided here is subject to change, as premiums and employer/employee contributions are reviewed annually. Insurance benefits are effective on the first day of the month following 30 days of employment. If dependents are not enrolled immediately, there are waiting periods for full benefits or additional premium requirements. (The exception would be a qualifying event – marriage, birth of a child, loss of employment by the spouse – but enrollment must occur within 30 days of the event)

### **Health Insurance:**

At the present time the City of Wahoo pays all but 8% of monthly premium for health insurance for employee and 75% of premium for covered dependents. Two health insurance options are available: a PPO plan with \$2,000 individual deductible or a \$3,000 individual deductible HSA-qualified plan.



**Employment History**(List past employers, starting with the most recent, including military. List others on separate page)

Employer \_\_\_\_\_

Address \_\_\_\_\_

From: \_\_\_\_\_ to: \_\_\_\_\_ Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Start \$: \_\_\_\_\_ Final: \_\_\_\_\_

Summarize the nature of work performed and job responsibilities: \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Employer \_\_\_\_\_

Address \_\_\_\_\_

From: \_\_\_\_\_ to: \_\_\_\_\_ Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Start \$: \_\_\_\_\_ Final: \_\_\_\_\_

Summarize the nature of work performed and job responsibilities: \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
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Employer \_\_\_\_\_

Address \_\_\_\_\_

From: \_\_\_\_\_ to: \_\_\_\_\_ Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Start \$: \_\_\_\_\_ Final: \_\_\_\_\_

Summarize the nature of work performed and job responsibilities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Employer \_\_\_\_\_

Address \_\_\_\_\_

From: \_\_\_\_\_ to: \_\_\_\_\_ Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Start \$: \_\_\_\_\_ Final: \_\_\_\_\_

Summarize the nature of work performed and job responsibilities: \_\_\_\_\_

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\_\_\_\_\_

**Security**

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Have you ever used any names or social security numbers other than those on this application?  
Yes No

If so, please explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Job Duty Information**

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Have you received a description of the job or been made aware of the essential functions of the job you are applying for? Yes No

If the job requires, do you have the appropriate valid driver's license? Yes No

DL #: \_\_\_\_\_ Type: \_\_\_\_\_ State: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Have you had your driver's license suspended or revoked, or had your driving privileges modified by a court of law? Yes    No

If yes, please explain \_\_\_\_\_

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Please list all states from which you hold or have held a driver's license: \_\_\_\_\_

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### **Educational Background**

Name and Location	Years Completed	Did you Graduate?	Course of Study
High School _____			
College _____			
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### **Skills and Qualifications**

Summarize special skills and qualifications acquired from employment or other experience that may qualify you for work with us. \_\_\_\_\_

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Please list any other licenses or certificates you may have that relate to the position applied for:

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**References**

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Include any individuals familiar with your work ability. Do not include relatives.

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone \_\_\_\_\_ Years Known \_\_\_\_\_  
Relationship \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
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Phone \_\_\_\_\_ Years Known \_\_\_\_\_  
Relationship \_\_\_\_\_

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Relationship \_\_\_\_\_

Name \_\_\_\_\_  
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Phone \_\_\_\_\_ Years Known \_\_\_\_\_  
Relationship \_\_\_\_\_

**Comments**

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**Certification and Release**

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I certify that I have read and understand foregoing Application for Employment and that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentations of facts called for in this Application may result in rejection of my Application, rescinding an offer, or discharge at any time during my employment.

I hereby give consent to any and all prior employers of mine to provide information with regard to my employment with prior employers to the City of Wahoo. I authorize the City of Wahoo and/or its agents, including consumer reporting bureaus, to verify any of the information contained on this Application including, but not limited to, criminal history and motor vehicle driving records prior to or upon my employment by the City of Wahoo. I authorize all persons, schools, companies and law enforcement authorities to release any information concerning my background and hereby release any said persons, schools, companies and law enforcement authorities from any liability for any damage whatsoever for issuing this information.

I understand that the use of illegal drugs is prohibited during employment. As company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to and during employment.

I understand that any employment offer is contingent upon my providing, within three (3) working days of employment, valid proof of identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986.

**Furthermore, I understand that, if hired, my employment will be strictly at will. That means that my employment is for an indefinite period and that the City of Wahoo or I may terminate the employment at any time, for any or no reason, with or without notice or intermediate steps, subject, however to personnel policies of the City of Wahoo. I further understand that no verbal statements or statements in any City of Wahoo policy or procedure manual, employee handbook, or other document shall be construed to have altered the at-will nature of my employment. I understand that no representative of the City of Wahoo has the authority to make any assurance to the contrary.**

I have read and reviewed the information provided in this Application and the above statements. By signing this Application for employment, I certify that I understand all parts of it and have answered all questions completely and fully.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**WAHOO POLICE DEPARTMENT  
605 N BROADWAY STREET  
WAHOO, NE 68066**

**RELEASE OF INFORMATION**

I herewith authorize the Wahoo Police Department, its employees or agents to make or cause to be made any investigation or inquiry regarding my background and experiences that may be related to my application for employment. I further release any former employers, schools, or individuals from any liability in connection with their statements and hold the Wahoo Police Department harmless for all lawful actions taken as a result of this background investigation. I agree that a fax or photocopy of this release of information should be accepted with the same authority as the original.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

This authorization will expire at the conclusion of this pre-employment background investigation.

**APPLICANT INFORMATION:**

**Name:** \_\_\_\_\_ **Other or Former Names:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone: Home:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Social Security Number:** \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date