

Town of Warren, RI

Applications are currently being accepted for the following position

Juvenile Hearing Board Case Coordinator

Applications, job specification and qualifications may be obtained on the Town's website https://www.townofwarren-ri.gov/residents/employment_proposals/index.php or in the Town Clerk's Office. Completed applications must be received in the Town Clerk's Office, 514 Main Street, Warren, RI **no later than 4:00 P.M. on April 16, 2021**. Warren is an equal opportunity employer. The Town of Warren reserves the right to reject any and all applications.

Times March 31 & April 7, 2021

Job Description

Juvenile Hearing Board Case Coordinator

- *Stipend Compensation.*
- *Establishes positive rapport with parents, juveniles, and hearing board members.*
- *Organizes and maintains case files that are referred by the police department.*
- *Develops and maintains open lines of communication with:*
 - *Parents*
 - *Board Members*
 - *Police Department*
 - *Community Resource Organizations*
- *Coordinates dates and times for hearing board meetings.*
- *Attends hearing board meetings held in the early evenings.*
- *Develops and maintains relationships with organizations in the community who offer safe, appropriate, enrichment programs for juveniles to perform service hours sanctioned by the hearing board.*
- *Understands and conforms to confidentiality requirements and procedures that are prescribed by the Family Court of RI pertaining to juvenile offenders.*
- *Ensure juvenile offenders are completing the requirements and sanctions set forth by the hearing board.*
- *Informs the police department immediately if a juvenile offender is not cooperating with the hearing board or completing the requirements and sanctions set forth by the hearing board.*
- *Coordinates meetings that are to be held virtually if state requirements against social gatherings exist.*

EDUCATION:

1. Name and Address of School Course of Study Years Completed Diploma Degree

High School: _____

College: _____

Trade/Other: _____

2. Name of last school or college you attended: _____

Year Last Attended: _____

3. List any foreign languages you can speak, read and/or write: _____

4. Check for which trades you have received formal education:

__Carpentry __Electrical __Plumbing __Heating __Other _____

Trade Certificate/License/Registration No. _____ State _____

Describe any other specialized training or education you have received through past employment or experience. _____

SPECIALIZED SKILLS

(List skill/equipment operated)

Office/Clerical:

Fire/Police:

Public Works:

Table with 3 columns: Office/Clerical, Fire/Police, Public Works. Rows include Telephone, Fax Machine, Calculator, Typewriter/wpm, Dictation/wpm, Payroll Data Input.

COMPUTER EXPERIENCE

__Data Input __Word Processing __Excel __Word

List other software programs you are familiar with: _____

OTHER QUALIFICATIONS

Summarize any special job related skills and qualifications or any additional information that you feel may be helpful to us in considering your application.

REFERENCES

List names, titles/positions and telephone numbers of three business/work references who are not related to you. If not applicable, list personal references who are not related to you.

Table with 3 columns: Name, Title, Phone #. Rows 1, 2, 3.

EMPLOYMENT EXPERIENCE:

Start with your present or most recent job.

Employer	From	To
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Address

Telephone Number(s)	Work performed
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Job Title	Supervisor
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Reason for Leaving

Employer	From	To
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Address

Telephone Number(s)	Work performed
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Job Title	Supervisor
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Reason for Leaving

Employer	From	To
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Address

Telephone Number(s)	Work performed
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Job Title	Supervisor
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Reason for Leaving

Employer	From	To
----------	------	----

Address

Telephone Number(s)	Work performed
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Job Title	Supervisor
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Reason for Leaving

APPLICANT STATEMENT

I certify that the information I have provided herein is true, complete and correct to the best of my knowledge. I understand that if information provided by me is found to be false, incomplete or misrepresented, this may be cause for elimination from further consideration, or for discharge. I understand that all statements contained on this form are confidential. I authorize the investigation and verification of all facts as may be necessary for the purpose of arriving at an employment decision. I hereby waive any rights or claims I may have regarding the Town of Warren, its employees or agents 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 such information about me. I understand and acknowledge that this application is not an employment agreement and does not define or establish the terms for such an agreement.

Signature of Applicant

Date

This application for employment shall be considered active for a period of time not to exceed sixty (60) days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.