

**CITY OF KETTLE FALLS  
POLICE ADMINISTRATIVE ASSISTANT**

The City of Kettle Falls will be accepting applications for a Police Administrative Assistant position. This position is a full-time (40 hours per week) with medical, dental, vision, vacation and sick leave. Applications must be accompanied by a resume. First review of applications will be Tuesday, March 17, 2026. Position is open until filled. Applications may be obtained at [www.cityofkettlefalls.org](http://www.cityofkettlefalls.org) or Kettle Falls City Hall, 580 Meyers Street, P.O. Box 457, Kettle Falls, WA 99141. \$22.00 - \$26.88 per hour, DOE

The City of Kettle Falls is an equal opportunity employer, and does not discriminate on the basis of race, color, national origin, sex, religion, age, sexual orientation or disability in employment or the provision of services.



# CITY OF KETTLE FALLS

## JOB DESCRIPTION

**Job Title:** Police Administrative Assistant    **Department:** Police Department

This is a position is responsible for performing clerical, receptionist and secretarial related tasks within the Police Department. Work requires independent judgment, considerable public contact requiring explanation of the department rules and established guidelines. Provides and coordinates administrative support functions of a substantive, professional nature. This is not a supervisory position.

## Job Duties and Responsibilities

Answers business phone for the department for emergency and non-emergency service requests.

Provide information and assistance to the public, regarding the policies, procedures, and purposes of City and departmental guidelines and regulations.

Monitors office supplies and preventative maintenance of equipment such as multiple line phone systems, copiers, scanners, typewriters and computers as required.

Maintain and process files for arrests, correspondence, cards, memos and reports.

Perform computer inquiries and enter law enforcement information (case report data, calls for service, wanted persons, vehicles, etc.).

Provide reports, respond to inquiries, works closely with other law enforcement agencies including Stevens County Prosecutor's Office; Juvenile Office; Child Protective Services (CPS); Washington State Patrol; etc.

Keep logs, indexes and process department mail.

Perform fingerprinting, process concealed pistol licenses and other permits as required.

Perform typing and data entry with responsibility for accuracy, basic grammar, punctuation and spelling.

Monitors and maintains accurate accounting of department budget for Chief of Police.

Prepare and process department invoices, vouchers and purchase orders.

Other duties as assigned.

## **Knowledge, Skills and Abilities**

While requirements may be representative of minimum levels of knowledge, skills and abilities, to perform this job successfully, the incumbent will possess the abilities or aptitudes to perform each duty proficiently.

- Ability to deal effectively with the public using tact and diplomacy.
- Work with little or no supervision and as a team member.
- Maintain confidentiality at all times
- General knowledge of peripheral office equipment
- Excellent organizational skills
- Effective and efficient oral and written communication skills
- Basic knowledge of Microsoft Word and Microsoft Excel
- Ability to handle multiple tasks with frequent interruption
- Ability to understand the nature of the call for service, and quickly and appropriately rephrase for dispatch to an officer;
- Maintain impartiality and composure when dealing with upset or verbally abusive complainants and criminal reports of a sensitive nature.

The job duties and responsibilities represented in this job description in no way imply that these are the only duties to be performed. Employees occupying the position will be required to follow any other job-related instructions and to perform any other job-related duties requested by a supervisor.

While requirements may be representative of minimum levels of knowledge, skills and abilities, to perform this job successfully, the incumbent will possess the abilities or aptitudes to perform each duty proficiently.

## **Working Conditions**

Work is performed primarily indoors in an environment where firearms and other dangerous weapons are present.

The employee must be able to sit or stand for long periods of time and is frequently required to use hands and fingers to handle objects or controls and reach with hands and arms, talk or hear. Employees are occasionally required to stoop, kneel, twist, crouch or crawl.

The employee may occasionally lift or move up to 40 lbs.

The employee is in some danger of injury or physical harm due to the nature of the criminal clientele that may call upon the department for service or be in custody within the working areas of the department.

## **Contacts and Relationships**

This position will have daily contact with employees of the City and with the citizens of the community. In addition he/she will be expected to present him/herself in a manner creditable to the City in all contacts with any individual, agency, or jurisdiction with which he/she may come in contact.

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## **Requirements**

- Graduation from a standard high school, vocational school or GED equivalent.
- Must pass a psychological and polygraph examination.
- Ability to read, write and speak fluently, in the English language.
- United States citizen

## **Experience and Training**

Any combination of experience and training that provides the desired skills, knowledge and abilities.

Requirements outlined in this job description may be subject to modification to reasonably accommodate individuals with disabilities who are otherwise qualified for employment in this position. However, some requirements may exclude individuals who pose a direct threat or significant risk to the health and safety of themselves or other employees.

*This job description does not constitute an employment agreement between the Employer and employee and is subject to change as the needs of the Employer and requirements of the job change. This job description should not be construed to imply that these requirements are the exclusive standards of the position. The duties listed above are intended only as illustrations of the various types of work that may be performed. Incumbents will follow any other instructions, and perform any other related duties, as may be lawfully required by their supervisor.*

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Employee

Date

**CITY OF KETTLE FALLS  
P.O. BOX 457  
KETTLE FALLS, WA 99141  
509-738-6821**

We are an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, creed, color, age, sex, religion or national origin.

**POSITION APPLIED FOR:** \_\_\_\_\_

**DEPARTMENT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**NAME:** \_\_\_\_\_  
(last), (first), (middle)

**SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**PHYSICAL ADDRESS:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**HOME TELEPHONE:**

**ALTERNATE PHONE:**

\_\_\_\_\_  
Give number where you may be reached or a message may be left.

**GENERAL INFORMATION**

Are you now or have you ever been employed by the city? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, give title, department and dates:  
\_\_\_\_\_

Will you accept part time or temporary employment? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have relatives employed by the city? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you possess a valid driver's license for Washington State? \_\_\_\_\_ Yes \_\_\_\_\_ No  
License number: \_\_\_\_\_

**OFFICE SKILLS:** (Write number of years of experience in space next to each skill)

Computer: \_\_\_\_\_ 10 key calculator \_\_\_\_\_ Typing speed: \_\_\_\_\_

Additional Skills: \_\_\_\_\_

### **COMPUTER SKILLS**

Describe your computer skills, including programs used:

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### **EQUIPMENT SKILLS**

Describe your equipment operation skills related to the job for which you are applying:

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**LICENSES AND CERTIFICATES:** (description, issued by and expiration date)

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### **EDUCATION AND TRAINING**

High School graduate or general education development test passed?

\_\_\_\_\_ Yes    \_\_\_\_\_ No

If no, circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

Colleges, vocational or technical schools, training centers: (List name of school, degree/certification earned and date of completion)

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**EMPLOYMENT AND SALARY HISTORY (Begin with most recent employer)**

From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Monthly Salary: \_\_\_\_\_

May we contact this employer? \_\_\_\_ Yes \_\_\_\_ No Hours per week: \_\_\_\_\_

Your Title: \_\_\_\_\_

Your Duties: \_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_ Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

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From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Monthly Salary: \_\_\_\_\_

May we contact this employer? \_\_\_\_ Yes \_\_\_\_ No Hours per week: \_\_\_\_\_

Your Title: \_\_\_\_\_

Your Duties: \_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_ Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

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From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Monthly Salary: \_\_\_\_\_

May we contact this employer?  Yes  No Hours per week: \_\_\_\_\_

Your Title: \_\_\_\_\_

Your Duties: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_ Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Monthly Salary: \_\_\_\_\_

May we contact this employer?  Yes  No Hours per week: \_\_\_\_\_

Your Title: \_\_\_\_\_

Your Duties: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_ Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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## **CONVICTION(S)**

Have you ever been convicted of a felony or served time in prison during the last seven years?  Yes  No

If yes, explain each conviction on an attached sheet and include the date, charge, place and action taken.

**REFERENCES:** List below the names of three (3) persons not related to you, who have known you at least one (1) year

Name	Phone	Relationship	Yrs Known
1:			
2:			
3:			

## **APPLICANT'S CERTIFICATION AND AGREEMENT**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize the city of Kettle Falls to verify their accuracy and to obtain reference information on my work performance. I hereby release the city of Kettle Falls from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

## CITY OF KETTLE FALLS

### AUTHORIZATION FOR RELEASE OF EMPLOYMENT PERSONNEL RECORDS

#### DOCUMENT REQUESTED BY THE CITY OF KETTLE FALLS:

- Employment Records
- Medical
- Personal Information
- Financial Information

Name of Applicant: \_\_\_\_\_

Maiden or Other Names: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN #: \_\_\_\_\_

Application for Position of: \_\_\_\_\_

#### To Whom It May Concern:

I respectfully request and authorize you to furnish to the City of Kettle Falls any employment, medical, physical and mental records or reports in your possession, including all information of a disciplinary, confidential or privileged nature (or Photostats of same). This information is to be used to assist the City in determining my qualifications and fitness for the position I am seeking with the City of Kettle Falls.

I hereby release to you, your agent(s) and your organization from any liability or damage which may result from furnishing the information requested above.

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\_\_\_\_\_  
Applicant's Signature

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\_\_\_\_\_  
Date

*Note: This form may be retained in your files.*