CITY OF TEMPE
Temporary Employment Opportunity

Community Services · Recreation Services Division · 3500 S. Rural Rd, Tempe, AZ 85282 · (480) 350-5200 · TDD (480) 350-8400

Temporary Concession Attendant
City of Tempe / Community Services – Recreation
Kiwanis Recreation Center

Opening Date: **February 12, 2013**

Closing Date: **Open until the needs of the City are met.**

Hourly Wage: **$8.50**

Work Schedule: **Flexible; Weekdays, Evenings; Weekends; 15-18 hours per week**

This is a Temporary Non-Benefitted position.

Experience & Training:

- Customer service, food preparation, and cash handling experience.
- Able to work positively with public and staff in a fast-paced work environment.
- Able to use necessary equipment for the successful operation of the Kiwani Island Snack Shack (i.e. deep fryer, microwave, convection oven, etc.)
- Able to communicate clearly and concisely, both orally and in writing.
- Able to understand and carry out written and oral direction.
- Able to follow established policies and procedures.
- Able to establish and maintain cooperative working relationships with public and staff.

Licenses/Certifications:

- Food Handlers Certification from the Maricopa County Department of Health Services is required
- First Aid and CPR certification (desired, but not required)

Essential Job Functions:

- Responsible and dependable
- Work under the direction and supervision of the Concession Manager ("CM").
- Responsible for general concession operations including, but not limited to: guest assistance, food preparation, facility and equipment cleaning/maintenance.
- Performing tasks involving money handling, inventory control and record keeping.
- Maintain compliance with standards set by the Health Department.
- Assist the CM to ensure the successful operation of the Kiwani Island Snack Shack.
- Performing other duties as necessary to ensure the safe and proper usage of the Kiwani Island Snack Shack.
- Able to work weeknights and weekends, as required.

Additional Information:

This position is seasonal in nature, with the majority of hours occurring during the summer season, generally May through August. There will be times during the off-season, September through April, when the Kiwanis Island Snack Shack is operational for special events, or the opening of the Wave Pool season (usually in March for weekends only).

Applicant Requirement:

Requires successful completion of selection process, completion of background investigation and verification of identity/work authorization. Successful completion of probationary period is contingent upon passing an FBI background investigation and drug test. Falsifying information or lying during any stage of the selection/hiring process will make you ineligible for new or continued City employment.

Selection Criteria:

Applications will be reviewed and only the most qualified applicants will be interviewed. Criteria will be based on job-related knowledge, skills, and abilities.

SUBMIT APPLICATION TO:

City of Tempe
Kiwanis Recreation Center
Attn: Carrie Reither
6111 S. All-America Way
Tempe, Arizona 85283

For questions, please contact:

Carrie Reither / Senior Recreation Coordinator
Telephone: (480) 350-5717
Fax: (480) 350-5777
TDD: (480)350-8400
Email: carrie_reither@tempe.gov

An equal opportunity/reasonable accommodation employer

City of Tempe - Community Services Department - Parks & Recreation
3500 S. Rural Road Tempe, Arizona 85282 (480) 350-5200

Application For Part-Time Recreation Employment

(NOT FOR SUMMER EMPLOYMENT)

Tempe

CHECK REQUIRED AVAILABILITY BEFORE INDICATING PROGRAM INTEREST. An Equal Opportunity Reasonable Accommodation Employer

PRINT CLEARLY AND NEATLY IN INK OR USE TYPEWRITER.
ANSWER ALL QUESTIONS COMPLETELY. SIGN THE APPLICATION

TITLE OF POSITION: _____

1. **Name:** _____ 2. **Social Security #:** _____
Last First Middle I.

3. **Address:** _____
Street - Apt. # City State Zip Code

4. **E-mail Address:** _____

5. **Phone - Home:** _____ **Office:** _____ **Message:** _____

6. **Driver's License: #:** _____ State: _____ Class: _____ Expiration Date: _____
Is this license currently valid: **Yes** _____ **No**_____

7. Are you at least 16 years old? **Yes** _____ **No** _____ Upon hiring, you may be required to show proof.

8. Are you a United States citizen or a legally registered alien? **Yes** _____ **No** _____

9. Are you related to any member of the City Council or any City Board or Commission member or any City employee?
Yes _____ **No** ____ If yes, indicate WORK, RELATIONSHIP AND POSITION: _____
_____

10. Have you ever worked for the City of Tempe? **Yes** _____ **No**_____ If yes, WHEN: _____ Month/Year

11. Dates available: From _____ To _____. Specify times you are available to work

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
List specific hours you are available to work, i.e. 8am-noon							

12. EDUCATION: Circle highest grade completed
GRADE SCHOOL 1 2 3 4 5 6 7 8 HIGH SCHOOL 9 10 11 12 COLLEGE 1 2 3 4 5 6

13. HIGH SCHOOL AND INSTITUTIONS OF HIGHER LEARNING
Name Dates Attended Major Degree or Diploma Obtained
_____
_____
_____
_____

14. CERTIFICATION OR REGISTRATION: (CPR, First Aid, Adv. Lifesaving, Lifeguard Training, W.S.I., etc.)
Current type of certifications: _____ Expirations Date: _____
_____ _____
_____ _____
_____ _____

Attach copies of current Certifications to application

(Turn Over)

EMPLOYMENT HISTORY:
Indicate your experience in each position beginning with your present or most recent position, including any military and volunteer experience. **Show your entire work history.** The amount of experience and the way you describe it, as it pertains to the position you are seeking, will determine whether or not you are given further consideration for the position. ***You may attach a resume to your application: however, your qualifications will be evaluated solely on this completed application form and supplemental questionnaire(s).***

15. **Place of Employment or Volunteer Experience:** _____ **Phone:** _____

Address: _____
Street City State Zip Code

Kind of Business: _____ Your Title: _____

Supervisor Name/Title: _____

Employment Dates: From _____ (Month/Year) To _____ (Month/Year) Total Time There _____ (Year(s)) _____ (Month(s))

Hours Per Week _____ Starting Wage $_____ per _____ Present/Ending Wage $_____ per _____

Description of work performed: _____

_____

_____

_____

Reason for leaving or wanting to change: _____

May we contact this employer if you are considered for the position? Yes _____ No _____

16. **Place of Employment or Volunteer Experience:** _____ **Phone:** _____

Address: _____
Street City State Zip Code

Kind of Business: _____ Your Title: _____

Supervisor Name/Title: _____

Employment Dates: From _____ (Month/Year) To _____ (Month/Year) Total Time There _____ (Year(s)) _____ (Month(s))

Hours Per Week _____ Starting Wage $_____ per _____ Present/Ending Wage $_____ per _____

Description of work performed: _____

_____

_____

_____

Reason for leaving or wanting to change: _____

May we contact this employer if you are considered for the position? Yes _____ No _____

17. **Place of Employment or Volunteer Experience:** _____ **Phone:** _____

Address: _____
Street City State Zip Code

Kind of Business: _____ Your Title: _____

Supervisor Name/Title: _____

Employment Dates: From _____ (Month/Year) To _____ (Month/Year) Total Time There _____ (Year(s)) _____ (Month(s))

Hours Per Week _____ Starting Wage $_____ per _____ Present/Ending Wage $_____ per _____

Description of work performed: _____

_____

_____

_____

Reason for leaving or wanting to change: _____

May we contact this employer if you are considered for the position? Yes _____ No _____

18. Please list other names you have gone by, so we can verify your previous work experience and/or education:

_____

19. Have you ever been convicted of a **misdemeanor** or **felony** (other than minor/civil traffic offenses), placed on probation, fined or given a suspended sentence (include military trial convictions?) Note: Reckless operation, hit-and-run, driving under the influence, excessive speeding, and similar charges are ***not*** considered minor traffic offenses; furthermore, an excessive number of traffic violations (including minor/civil offenses) should be reported.

Yes θ No θ If Yes, give details, including charges, dates, locations, etc. (attach a separate page if necessary):

_____

_____

_____

It is to your advantage to provide a full disclosure of your record, as convictions do not automatically bar you from employment with the City. **However, failure to admit convictions will result in automatic disqualification from new or continued employment** (tempered by the specific considerations listed in the "Truth in Application Policy" below.)

TRUTH IN APPLICATION POLICY

The City of Tempe places a prime value on integrity. This value applies to all phases of City business. In particular, the City values, and in fact requires, honesty in completing employment applications. This is important to creating a fair process oriented towards selecting the best candidate. Therefore, the City will not tolerate lies or omissions of material fact on employment applications.

The City of Tempe has a "*zero tolerance*" of untruthfulness in application materials. The City conducts a background check upon hire to verify the information contained in the application. However, at the same time that the City values integrity and truth in applications, it recognizes that people may make mistakes and may learn from them. Therefore, the City's "*zero tolerance*", as stated in this policy, is tempered by the following considerations:

1. Convictions will not automatically bar an application from employment for City jobs. The relationship of the conviction to the job, as well as its severity, the passage of time, and subsequent job performance will all be considered.

2. Applicants are not required to report convictions that have been expunged or sealed by a court of law.

3. If misstatements or omissions of material fact are discovered after seven (7) years of the date of an application, there may be grounds for dismissal from City employment, but such dismissal will be considered on a case-by-case basis, weighing the severity of the misstatement/omission against subsequent job performance and its relationship to the job.

I agree and understand that any deliberate misstatement or omission of material fact on application documents will cause forfeiture on my part of all eligibility to any employment with the City of Tempe, and will cause forfeiture of my job if I am currently employed or become employed by the City of Tempe.

My signature on this application form acknowledges my understanding and agreement with the above policy.

20. I certify that all statements made on all application materials are true and complete. In addition, I authorize any individual, company, organization or institution to release any and all information concerning statements made by me on this application, and I do hereby release all parties and individuals connected therewith from all liabilities for any damages whatsoever incurred in furnishing such information.

_____

SIGNATURE DATE

Reminder: υ Is your required supplemental form attached to your application ? ?

Name: _____ Social Security No.: _____

I hereby authorize the City of Tempe to check my references with the following employer (**complete one box for each employer listed on application and supplement-make additional copies if needed):**

Date(s) Employed: _____

Company Name: _____

Address/City/Zip: _____

Supervisor's Name/Title: _____

Phone #: (____) _____ Fax # (____) _____

Signature _____ **Date** _____

Name: _____ Social Security No.: _____

I hereby authorize the City of Tempe to check my references with the following employer (**complete one box for each employer listed on application and supplement-make additional copies if needed):**

Date(s) Employed: _____

Company Name: _____

Address/City/Zip: _____

Supervisor's Name/Title: _____

Phone #: (____) _____ Fax # (____) _____

Signature _____ **Date** _____

Name: _____ Social Security No.: _____

I hereby authorize the City of Tempe to check my references with the following employer (**complete one box for each employer listed on application and supplement-make additional copies if needed):**

Date(s) Employed: _____

Company Name: _____

Address/City/Zip: _____

Supervisor's Name/Title: _____

Phone #: (____) _____ Fax # (____) _____

Signature _____ **Date** _____