CITY OF TEMPE
Temporary Employment Opportunity

Public Works Department · · Parks Division♦55 S. Priest Dr. Building A, Tempe AZ 85281♦(480)350-5268♦TDD480/350-5050

Temporary Park Monitor
City of Tempe / Public Works Department – Parks

Opening Date: **September 23, 2013**

Closing Date: **First review of applications October 4, 2013. Subject to close when the needs of the City are met.**

Hourly Wage: **$10.00 per hour**

Work Schedule: **4:00 p.m. to 2:30 a.m. Monday- Friday**
7:00 a.m. to 12:00 a.m. weekends

This is a Temporary Non-Benefitted position

Experience & Training: Experience in softball/baseball and/or soccer is preferred as this position will require basic field preparation and/or maintenance.

Licenses/Certifications: Driver's License required

Essential Job Functions:

- Visit park areas nightly and on weekends
- Report general condition of the parks
- Document user activity, hazards or misuse of the facilities
- Providing information related to the park facilities, programs and policies
- Inform park patrons of park policies and City ordinances as they pertain to park usage. Observe that policies are followed or that enforcement from appropriate measures is followed.
- Open and secure facilities in the parks
- Turn on and off lights at parks and fields
- Perform minor maintenance to park equipment
- General facility upkeep; Including trash & litter pick-up if necessary
- Provide excellent customer service
- Communicate clearly and concisely both orally and in writing
- Establish and maintain cooperative working relationships with public and other city staff.
- Complete work assignments in a timely manner
- Follow written and verbal directions
- Be able to lift and move equipment up to 50 pounds
- Other duties as assigned

Applicant Requirement: Requires successful completion of selection process, successful completion of background investigation and verification of identity and work authorization. Most possess and maintain a valid Arizona Driver's License

SUBMIT APPLICATION TO:
City of Tempe
Recreation Division
Attn: Shaun Isabell
3500 S. Rural Rd.
2nd Floor Tempe Library
Tempe, Arizona 85282

For questions, please contact:
Shaun Isabell, Sr. Recreation Coordinator
480-350-5268

An equal opportunity/reasonable accommodation employer

Application For

Temporary Employment

An Equal Opportunity Reasonable Accommodation Employer

Public Works Department/ Field Operations Division

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

TITLE OF POSITION: _____

1. **Name:** _____ 2**. Last 4 digits of Social Security #:** _____
   Last First Middle In.

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

4. **Email Address:** _____

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

6. **Do you possess a valid Driver's License? Yes ____ No____**

7. **Are you at least 18 years old? Yes ___ No ___** Upon hiring, you may be required to show proof.

8. **Are you legally authorized to work in the United States? Yes ___ No____**

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

In accordance with Rule 3, Section 301, of the Tempe Personnel Rules and Regulations, no parent (in-law and step), child (in-law and step), or spouse of a regular employee, City Councilmember, Board or Commission member can be hired as a temporary employee within the same department, except as noted in the Rule.

10. **Have you ever worked for the City of Tempe? Yes ___ No**

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

12. **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							

13. **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

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

15. **Professional Registration(s), License(s), and/or Certification(s) you possess *that relate to this position*:**
    (Please attach a copy of all certifications/registrations)

Type of Professional Registration, License, and/or Certification:	License Number (if applicable):	Date Received:	Expiration Date (if applicable):

16. **EMPLOYMENT HISTORY:**

You may make copies and use as many of these sheets as necessary to continue your employment history.

Begin with your present or most recent position. List all jobs, paid or volunteer, for at least the past ten years or any additional relevant experience. Your qualifications will be evaluated ***solely*** on the application form and, if applicable, any supplemental questionnaire(s).

RESUMES MAY NOT BE SUBSTITUTED FOR THE REQUESTED INFORMATION.

DO NOT WRITE "SEE RESUME" OR "SEE ATTACHED" IN THE SPACES BELOW.

Place of Employment or Volunteer Experience: _____ **Phone:** _____
Address: _____
Street City State Zip Code
Type of Business: _____ Your Title: _____
Supervisor Name/Title: _____
Employment Dates: From _____ To _____ Total Time There _____
Month/Year Month/Year Year(s) Month
Hours Per Week _____ Starting Wage $_____ per _____ Ending Wage $ _____ per _____
Description of Work Performed: _____
_____
_____
_____

Reason for leaving: _____
May we contact this employer if you are considered for the position: Yes _____ No _____

Place of Employment or Volunteer Experience: _____ **Phone:** _____
Address: _____
Street City State Zip Code
Type of Business: _____ Your Title: _____
Supervisor Name/Title: _____
Employment Dates: From _____ To _____ Total Time There _____
Month/Year Month/Year Year(s) Month
Hours Per Week _____ Starting Wage $_____ per _____ Ending Wage $ _____ per _____
Description of Work Performed: _____
_____
_____
_____

Reason for leaving: _____

Place of Employment or Volunteer Experience: _____ **Phone:** _____
Address: _____
Street City State Zip Code
Type of Business: _____ Your Title: _____
Supervisor Name/Title: _____
Employment Dates: From _____ To _____ Total Time There _____
Month/Year Month/Year Year(s) Month
Hours Per Week _____ Starting Wage $_____ per _____ Ending Wage $ _____ per _____
Description of Work Performed: _____
_____
_____
_____

Reason for leaving: _____

17. Have you ever been requested or forced to resign from a position for misconduct or unsatisfactory service?

☐ Yes ☐ No If Yes, please explain: _____

_____

_____

18. 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, D.U.I., excessive speeding, and similar charges are NOT considered minor traffic offenses. Moreover, an excessive number of traffic violations (including minor/civil offenses) should be reported.

☐ Yes ☐ No If Yes, provide charges, dates and locations: _____

_____

_____

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

PLEASE READ THIS STATEMENT AND CAREFULLY REVIEW YOUR ENTIRE APPLICATION MATERIAL BEFORE SIGNING BELOW.

I certify that all statements made on the application form and, if applicable, any supplemental questionnaire(s) are true and complete. I understand that any omission, misstatement, or falsification may be cause for rejection of this application, removal of my name from an eligibility list(s), and/or discharge from City Service. 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.

Print Applicant's Name: _____

Applicant Signature: _____

Date