

# CITY OF TEMPE

## Temporary Employment Opportunity



Community Services – Arts + Culture | Tempe Center for the Arts | 700 W Rio Salado Parkway | 480.350.2914 | [tempe.gov/artsjobs](http://tempe.gov/artsjobs)

### Crew Chief

**Closing Date:** January 05, 2025  
**Hourly Wage:** \$24.75 per hour  
**Work Schedule:** 30-40 hours per week. Work schedule varies in accordance with event schedule.

**This is a Temporary Position with Medical Benefits only**

#### Education and/or Experience:

- Two (2) years of professional experience in technical theater production. Associate degree preferred but not required.
- Proficiency with lighting systems, sound systems, sound consoles, and basic rigging.

#### Essential Job Functions:

- Assist TCA Production team with production needs of events in Tempe Center for the Arts.
- Oversee the use of production equipment and serve as site manager during events.
- Advise on and execute audio and/or lighting needs for events.
- Ensure operational readiness of audio and/or lighting equipment.
- Perform and coordinate regular maintenance and safety inspections of equipment.
- Prepare reports, including event evaluations, industrial injury summaries, incident reports, and others.
- Contribute to the maintenance of production records, including equipment inventory, equipment manuals and documents, warranty information, logs, rental agreements, service contracts, personnel event records, and others.
- Load and unload scenery, audio and lighting equipment, program boxes, trusses, chairs, etc.
- Assist with performing minor building repairs.
- Must be able to: reach, bend, stoop, and lift up to 40 pounds; communicate clearly and effectively verbally and in writing, communicate with other facility staff to ensure coordinated execution; work in a standing and/or sitting position for up to eight hours; work in a fast-paced environment; follow directions and ask questions for clarification when needed.
- Perform additional duties as assigned.

#### Applicant Requirements:

Requires successful completion of selection process, completion of background investigation and verification of identity/work authorization.

#### Benefits:

This is a “full-time temporary” position with paid sick leave and medical benefits available. This position also participates in the Arizona State Retirement System (ASRS) defined benefit plan with mandatory employer and employee contributions.

#### How to Apply:

Submit cover letter, resume, and application to Cody Downing at [cody\\_downing@tempe.gov](mailto:cody_downing@tempe.gov). In the subject line enter “Crew Chief – (your last name)” Refer questions to Cody Downing, Production Coordinator: [cody\\_downing@tempe.gov](mailto:cody_downing@tempe.gov), 480.350.2914

#### Equal Employment Opportunity:

The City of Tempe is an Equal Opportunity / Reasonable Accommodation employer. The city does not discriminate based on race, color, gender identity, sexual orientation, religion, national origin, familial status, age, disability, and United States military veteran status. Pursuant to the Americans with Disabilities Act, the city will make a reasonable accommodation(s) during the recruitment & selection process. Persons with a disability may request reasonable accommodation by contacting Human Resources at 480-350-8276. Requests should be made as early as possible to allow time to arrange the accommodation.



# Temporary Employment Application

Last Name:		First Name:		MI:
Street Address:			City, State, Zip	
Phone Number:		E-Mail Address:		

Position(s) applying for \_\_\_\_\_

Do you possess a valid Driver's License (may be required for certain positions)?  Yes  No

Your age group is?  15-17 years  18-20 years  21 years+

Are you a U.S. Citizen or a non-U.S. Citizen authorized to work in the United States?  Yes  No

Have you ever worked for the City of Tempe?  Yes  No

If yes, from \_\_\_\_\_ (mm/yy) to \_\_\_\_\_ (mm/yy)

Are you related to any member of the Tempe City Council or any Tempe Commission/Board Member, or any City of Tempe employee?  Yes  No If yes, please indicate his/her name, position, and relationship to you:

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To assist us with verifying previous work experience and /or education, please list other names you have gone by:

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Are you a veteran?  Yes  No

NOTE: If you are claiming Civil Service Preference for Veterans under ARS 38-492, you must submit a copy of your DD214 (Member-2 or 4) at the time you are invited to a testing process.

Dates available: From \_\_\_\_\_ To \_\_\_\_\_

Please specify times you are available to work on the chart below.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Have you obtained a high school diploma or a high school equivalent certification?  Yes  No

If no, please indicate your highest grade level completed \_\_\_\_\_

**Education from an accredited College/University:**

College:	Major:	Type of Degree:	Degree Completed:
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

**Trade and/or Technical Schools:**

Trade/Technical School:	Subject Studied:	Type of Degree:	Degree Completed:
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

**Certification or Registration (CPR, First Aid, Adv. Lifesaving, Lifeguard Training, W.S.I etc.)**

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

**Special training *that relates to this position*:**

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**List computer software program(s) with which you are proficient in operating *that relate to this position*:**

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**Language Proficiency (other than English):**

Language:	Speak:	Read:	Write:
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

**DO NOT WRITE "SEE RESUME" IN THE SPACES BELOW.**

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Place of Employment or Volunteer Experience:

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Address:

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Phone:

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Job Title:

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Employees Supervised:

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Supervisor (Name/Title/Phone):

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Employment Dates (mm/yy):

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Hours Per Week:

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Wage: \$            per

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Work Performed:

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Reason for Leaving:

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Place of Employment or Volunteer Experience:

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Address:

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Phone:

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Job Title:

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Employees Supervised:

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Supervisor (Name/Title/Phone):

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Employment Dates (mm/yy):

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Hours per Week:

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Wage: \$            per

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Work Performed:

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Reason for Leaving:

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Place of Employment or Volunteer Experience:

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Address:

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Phone:

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Job Title:

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Employees Supervised:

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Supervisor (Name/Title/Phone):

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Employment Dates (mm/yy):

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Hours Per Week:

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Wage: \$            per

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Work Performed:

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Reason for Leaving:

Place of Employment or Volunteer Experience:		
Address:	Phone:	
Job Title:	Employees Supervised:	
Supervisor (Name/Title/Phone):		
Employment Dates (mm/yy):		
Hours Per Week:	Wage: \$	per
Work Performed:		
Reason for Leaving:		

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

Yes  No *If Yes, please explain:*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>PLEASE READ THIS STATEMENT AND CAREFULLY REVIEW YOUR ENTIRE APPLICATION MATERIAL BEFORE SIGNING BELOW.</b>		
<p>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.</p>		
Print Applicant's Name	Applicant Signature	Date

<b><u>FOR ADMINISTRATIVE USE ONLY</u></b>	
<b>Job Code:</b> _____	<b>Cost Center:</b> _____
<b>Title:</b> _____	<b>Hourly Wage:</b> _____
<b>Supervisor:</b> _____	<b>Weekly Hours:</b> _____