

CITY OF TEMPE

Temporary Employment Opportunity



Community Services @ Kiwanis Recreation Center @ 6111 S. All America Way, Tempe, AZ 85283 @ (480) 350-5201 www.tempe.gov/jobs

Concessions Cashier/Crew Member (Kiwanis Recreation Center-Parks and Recreation)

Opening Date: January 17, 2020

Closing Date: March 15, 2020

Hourly Wage: \$12.00 per hour

Work Schedule: All shifts 12:00 p.m. to 5:30 p.m. **Weekends required**
April/May weekends only; 5 to 6 hours
June/July; 12 to 15 hours per week
August weekends only; 5 to 6 hours

This is a Seasonal Temporary Non-Benefitted position.

Experience & Training:

- Must be 16 yrs. of age; Bi-lingual (Spanish) a plus
- Experience in customer service or cashier handling experience a plus; will train
- Basic math and computer skills
- Primary job is cashiering-will be trained on other stations: fryer, inventory, food prep and clean-up
- Ability to operate a computerized Point of Sale System and prepare food items
- Ability to handle transactions accurately and responsibly
- Provide positive customer service to public in a fast-paced team environment

Licenses/Certifications:

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

Essential Job Functions:

- Responsible for taking food orders, accepting payments, ensuring all prices are accurate and providing a receipt to every customer.
- Balance the cash register and generating reports for credit and debit sales
- Work under the direction and supervision of the Concession Manager ("CM").
- Making it right for the guest by de-escalating any negative situations & recover the guest
- Comfortable working occasionally in walk-in coolers and freezers
- Must be able to work around heat and work in close quarters with others as well as with various cleaning products.
- Maintain compliance with standards set by the Maricopa Health Services.
- Communicate clearly and concisely; ability to follow policies and procedures.
- Execute tasks in a timely manner; responsible and reliable.
- Able to work weeknights and weekends, as required.

Additional Information:

This position is seasonal in nature, with most of hours occurring between May through August. Occasional hours in the off-season, September through March. During the off-season, there are other opportunities to be trained in other departments at the Kiwanis Recreation Center.

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: Carmen Sanchez
6111 S. All-America Way
Tempe, Arizona 85283

For questions, please contact:

Carmen Sanchez / Sr. Recreation Coordinator

Telephone: (480) 350-5216

Fax: (480) 350-5777

Email:

carmen_sanchez@tempe.gov

EQUAL EMPLOYMENT OPPORTUNITY: *The City of Tempe is an Equal Opportunity / Reasonable Accommodation employer. The City does not discriminate on the basis of 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 a 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:

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

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*:

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

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.

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:

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:

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:

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:*

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

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