



2022 PARKS MAINTENANCE **SUMMER EMPLOYMENT POSITIONS**



The Town of Yorktown Parks Department directs a variety of programs, activities, facilities, and events that require additional staff. We are looking hiring seasonal maintenance staff this summer. These positions will be overseen by our Parks Forman and Parks staff. All maintenance candidates should enjoy working outdoors and physical work. If you are interested in helping us manage a variety of recreation services and feel comfortable in a public setting, please fill out an application and return it to the Department of Recreation and Parks today.

APPLICATION PROCESS

Applicants must include two (2) completed reference forms with application in order to be considered for an interview. Applicants must indicate position(s) desired on application and any appropriate experience to substantiate your interest. References will be verified. All applicants will be subject to a pre-employment drug screening. To ensure an opportunity to interview, please submit your completed application along with two (2) references to the Yorktown Parks & Recreation Department at 176 Granite Springs Road, Yorktown Heights, NY 10598 as soon as possible.

DEADLINE: Applications accepted until positions are filled.

PAY RATE: Hourly Rate Varies

PARK MAINTENANCE

- Under the supervision of the Parks Foreman and Recreation Staff.
- General park, facility maintenance and landscaping.
- Preparation of ball fields.
- Cleaning of pool and park facilities as needed.
- Valid Driver's License required.
- Must be 18 years of age or older.

POOL MAINTENANCE

- Under the supervision of the Parks Foreman and Recreation Staff.
- Assigned to Junior Lake Pool and/or Brian J. Slavin Pool (Shrub Oak).
- General pool and facility maintenance including cleaning.
- Landscaping around pool.
- Weekday and Weekend Shifts available at both pool facilities.
- Must be 18 years of age or older.



TOWN OF YORKTOWN PARKS & RECREATION APPLICATION FOR SEASONAL EMPLOYMENT

**COMPLETE APPLICATION AND REFERENCES AND RETURN ALL DOCUMENTS TO:
YORKTOWN PARKS & RECREATION DEPARTMENT
176 GRANITE SPRINGS ROAD, YORKTOWN HEIGHTS, NY 10598**

NAME LAST	FIRST	MIDDLE	SOCIAL SECURITY #
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ADDRESS	CITY	STATE	ZIP	HOME # () CELL # ()
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Are you 18 years old or older? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, what age: _____ Minimum age for hire: 16	Are you a Town of Yorktown Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No	E-mail address _____
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EDUCATION	Name & Location	Course/ Major	Type of degree	Dates attended From/To	Date degree received or expected
HIGH SCHOOL					
COLLEGE OR POST HIGH SCHOOL					
GRADUATE SCHOOL					

Certificates or Special Training _____

EMPLOYMENT HISTORY (Up to last 5 years)

NAME & ADDRESS OF EMPLOYER	FROM MO./YR.	TO MO./YR.	KIND OF WORK OR POSITION	REASON FOR LEAVING

Do you have any computer skills? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify: _____	Can you operate any other equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify: _____
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In addition to English, are you fluent in any other language? Yes No If yes, specify: _____

Have you worked for the Town of Yorktown before? Yes No Which Department: _____
Reason for leaving: _____

Check job preference applying for:

- | | |
|--|---------------------------|
| 1. Day Camp: Director _____ Specialist _____ Counselor _____ CIT _____ | 5. Park Maintenance _____ |
| 2. Lifeguard _____ (see below) | 6. Program Staff _____ |
| 3. Gate Attendant _____ | |
| 4. Swim Aide _____ | |

For Lifeguard Only Check Below: (Indicate certification & expiration dates)

Lifeguard Training/ First Aid	Lifeguarding/ First Aid	CPR/AED for the Professional Rescuer	Instructor Certifications	Waterfront or Waterfront Lifeguarding	Headguard or Lifeguard Management
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LGI R. 06 <input type="checkbox"/> WSI R. 06 <input type="checkbox"/> CPR/AED <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EXPIRES _____	EXPIRES _____	EXPIRES _____	EXPIRES _____	EXPIRES _____	ISSUE DATE _____

**ALL LIFEGUARD APPLICANTS MUST PARTICIPATE IN THE RECREATION DEPARTMENT WATER SKILLS TEST.
THE DATE WILL BE ANNOUNCED IN THE SPRING AND WILL TAKE PLACE AT ONE OF THE MIDDLE SCHOOL POOLS.**

FOR ALL APPLICANTS: Dates available to work From _____ / _____ / _____ To _____ / _____ / _____ Month / Day Month / Day	Do you have a Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No Type _____
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Where did you hear about this program/job?

Comments:

1. WERE YOU EVER DISMISSED OR DISCHARGED FROM ANY EMPLOYMENT FOR REASONS OTHER THAN LACK OF WORK OR FUNDS? YES NO
2. DID YOU EVER RESIGN FROM ANY EMPLOYMENT RATHER THAN FACE DISMISSAL? YES NO
3. DID YOU EVER RECEIVE A DISCHARGE FROM THE ARMED FORCES OF THE US WHICH WAS OTHER THAN HONORABLE, OR WHICH WAS ISSUED FOR OTHER THAN HONORABLE CIRCUMSTANCES? YES NO
4. HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE (MISDEMEANOR OR FELONY)? YES NO
(GIVE DETAILS)
5. HAVE YOU EVER FORFEITED A BAIL BOND POSTED TO ANSWER ANY CRIMINAL CHARGE? YES NO
(GIVE DETAILS)
6. ARE YOU NOW UNDER CHARGES FOR ANY CRIMINAL OFFENSE(MISDEMEANOR OR FELONY)? YES NO
(GIVE DETAILS)

IF YOU ANSWERED "YES" TO ANY QUESTIONS ABOVE, YOU MUST PROVIDE AN EXPLANATION ON AN ATTACHED PIECE OF 8 1/2 X 11 PAPER. None of the above circumstances represents an automatic bar to employment. Each case is considered and evaluated on individual merits in relation to the duties and responsibilities of the position(s) for which you are applying.

ALL STATEMENTS ARE SUBJECT TO VERIFICATION AND CRIMINAL RECORDS CHECK.

THIS AFFIRMATION MUST BE COMPLETED: I affirm that all statements made on this application (including any attached papers) are true under the penalties of perjury. (Applicants are advised that all statements made by them in connection with their application(s) for employment are subject to investigation and verification.) This application may be used for review by the prospective appointing authority as part of a background investigation.

PURSUANT TO 210.45 OF THE NEW YORK STATE PENAL LAW, IT IS A CRIME PUNISHABLE AS A CLASS "A" MISDEMEANOR TO KNOWINGLY MAKE A FALSE STATEMENT HEREIN.

For employment: In accordance with the Town of Yorktown's comprehensive drug-free workplace policy & procedures, and commitment to maintain a safe, alcohol and drug-free work environment, you may be required to submit to urinalysis, breath and/or blood test.

DATE: _____ APPLICANT'S SIGNATURE: _____

IF UNDER AGE 18, SIGNATURE OF PARENT OR GUARDIAN IS REQUIRED.

"I have read my child's/ward's completed application form and hereby give my permission for him/her to be hired by the Town of Yorktown for the purpose of Seasonal Employment and I further give my permission for him/her to receive emergency medical treatment if necessary. If at any time I revoke this permission, I will do so in writing to the Yorktown Department of Human Resources, and upon receipt by the Department of Human Resources of said revocation my child's/ward's employment shall be terminated".

By my signature below, I hereby give my permission for _____ to submit to urinalysis, breath, and/or blood test as a condition of Seasonal Employment with the Town of Yorktown in accordance with the Town of Yorktown's comprehensive drug-free workplace policy & procedures.

DATE: _____ SIGNATURE OF PARENT OR GUARDIAN: _____



The Town of Yorktown is an Equal Opportunity Employer.

Yorktown Parks & Recreation Department
 176 Granite Springs Road, Yorktown Heights, NY 10598-3306

Personal reference for: _____

The above individual is applying for a _____ position with the Town of Yorktown Parks & Recreation Department. Your name has been listed as a reference. Please indicate your feelings regarding this individual in relation to his/her potential performance as a seasonal employee by completing the information below. All references will be kept confidential. Please return to the above address with application. Thank you for your assistance.

Sincerely,
 James Martorano Jr.
 Superintendent of Parks & Recreation

	NEEDS IMPROVEMENT	SATISFACTORY	SUPERIOR	NO OPINION
Ability to accept responsibility	_____	_____	_____	_____
Ability to work with others	_____	_____	_____	_____
Leadership	_____	_____	_____	_____
Ability to take initiative	_____	_____	_____	_____
Judgment	_____	_____	_____	_____
Trustworthiness	_____	_____	_____	_____
Ability to follow directive	_____	_____	_____	_____
Commitment	_____	_____	_____	_____

How long and in what capacity/relationship have you known the applicant? _____

Do you recommend this person for hire? _____ Yes _____ No _____

Additional comments: _____

NAME: _____ SIGNATURE: _____ DATE: _____
PRINT

PHONE: _____ RELATION TO APPLICANT (no relatives): _____

OFFICE USE ONLY:

Reference Check Completed: _____ DATE _____ SIGNATURE _____

Yorktown Parks & Recreation Department

176 Granite Springs Road, Yorktown Heights, NY 10598-3306

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Judgment	_____	_____	_____	_____
Trustworthiness	_____	_____	_____	_____
Ability to follow directive	_____	_____	_____	_____
Commitment	_____	_____	_____	_____

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Additional comments: _____

NAME: _____ SIGNATURE: _____ DATE: _____
PRINT

PHONE: _____ RELATION TO APPLICANT (no relatives): _____

OFFICE USE ONLY:

Reference Check Completed: _____
DATE

SIGNATURE