



Union City Community & Recreation Services Department is currently accepting applications for the following part time, seasonal positions:

PARK MONITORS & PARKING LOT ATTENDANTS

\$15-\$17 per hour, 10-20 hours per week

Responsible individuals are needed to maintain and enforce proper city procedures and policies in our parks, parking lots and ball fields. Park monitors would perform park inspections and enforce park policies, supervise patrons and renters and daily facility management. Park monitors and parking lot attendants must stand firm on policies, control diverse situations and possess a friendly disposition and professional demeanor at all times. Park monitors and parking lot attendants must also have the ability to communicate and respond to customer service concerns, handle all weather conditions and be reliable with a strong work ethic and personal integrity. Park monitors and parking lot attendants will be required to wear a city uniform while on duty. Must be available for 5-10 hour shifts Saturdays and Sundays between the hours of 6 am-8 pm.

Minimum Qualifications: Must be 18 years old. Must possess a valid California driver's license required and have own reliable transportation; provide results of a recent TB Test; possess CPR, AED & First Aid certifications prior to beginning work; and prior experience working in parks, recreation or related services is desirable.

APPLICATIONS: For more detailed information about the positions or to have an application mailed to you, contact Trish Heuer at 510-675-5328 or trishh@unioncity.org. Applications may be obtained at the Kennedy Youth Center, 1333 Decoto Road or downloaded at: www.unioncity.org/187/Human-Resources. Kennedy Youth Center Hours are 9 am – 12 pm and 1 - 6 pm, Monday – Friday (closed every other Friday). Applications can be mailed to Trish Heuer, Union City Community & Recreation Services, 34009 Alvarado-Niles Road, Union City, CA 94587.

Positions open until filled. In addition to any specific qualifications, **all selected candidates will be fingerprinted for a complete background check.**

GENERAL PHYSICAL REQUIREMENTS: All positions require certain physical abilities which may include occasional to frequent standing, sitting, walking, reaching, twisting, turning, kneeling, bending, squatting, stooping, running and climbing in the performance of daily activities, as well as the ability to withstand working in an outdoor environment with exposure to sun, dust, wind, pollen and vegetation. Positions may also require physical coordination, repetitive movements, and the ability to lift and carry up to 50 pounds.

AN AFFIRMATIVE ACTION EMPLOYER:

Qualified applicants receive equal consideration without regard to race, color, religion, sex, national origin, ancestry, age, marital status or disability, except where dictated by the requirement of the job. In accordance with Federal Americans with Disabilities Act (ADA), if special accommodations are necessary at any stage of the selection process, please contact the Recreation Supervisor prior to the final date for accepting applications. Medical documentation must be provided upon request. As a request of the 1986 Immigration Reform Act, you must, prior to employment, furnish proof of your identity and eligibility for employment in the United States.

City of Union City Website: www.UnionCity.org



CITY OF UNION CITY

34009 ALVARADO-NILES ROAD
 UNION CITY, CALIFORNIA 94587
 510-471-3232
 URL: www.ci.union-city.ca.us

EMPLOYMENT APPLICATION
 PRIOR TO HIRE, CANDIDATES MUST MEET THE DOCUMENTATIONS REQUIREMENTS OF THE IMMIGRATION REFORM AND CONTROL ACT OF 1986.

FOR PERSONNEL USE ONLY

ACCEPTED REJECTED
 BY: _____ EXPERIENCE
 DATE: _____ EDUCATION
 NOTE: _____

1 - POSITION YOU ARE APPLYING FOR: _____

2 - NAME: LAST _____ FIRST _____ MIDDLE _____

3 - ADDRESS: _____

4 - CITY: _____ STATE: _____ ZIP: _____

5 - HOME PHONE: _____ CELL PHONE: _____ BUSINESS: _____

6 - EMAIL ADDRESS: _____

7 - Name any relatives who work for the City of Union City: _____

8 - If you are applying for the position of Police Officer, will you be 21 years of age by the time of appointment (within six months of the final filing date)? YES NO

9 - Have you ever been employed by the City of Union City? _____

10 - If you feel that you have any physical limitation that would require test accommodations, contact the Personnel Department at 510-471-3232.

11 - EDUCATION & TRAINING: Highest grade completed? _____ 13- DID YOU GRADUATE? YES NO 14 - If not, do you have a GED or California High School Proficiency Certificate? YES NO

12 - HIGH SCHOOL LOCATION _____

15 - NAMES OF COLLEGES/UNIVERSITIES ATTENDED	Dates Attended	Course or Study/Major	Degree Awarded		Completed Semester / Quarter		Type of Degree	Date Degree Completed
			YES	NO	Units	Units		
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____

16 - OTHER RELEVANT COURSES AND TRAINING	NAME AND LOCATION OF INSTITUTION	Length of Course	Date Ended
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

17 - PROFESSIONAL LICENSE OR CERTIFICATE, IF REQUIRED	Serial No.	Date Issued	Expiration Date
_____	_____	_____	_____
_____	_____	_____	_____

18 - Drivers License Number and State: _____ 19 - Skills, if Required for this Position: Typing Speed: _____ WPM
 20 - List any Foreign Language in which you are fluent: _____ 21 - OTHER SKILLS: _____

22 - Give name and address of 3 persons who are familiar with your qualifications:

Name _____	Address _____	City _____	Phone _____
Name _____	Address _____	City _____	Phone _____
Name _____	Address _____	City _____	Phone _____

NAME: LAST _____ FIRST _____ MIDDLE _____ POSITION APPLIED FOR _____.

23- EMPLOYMENT HISTORY: List your work record for the last 10 years. Begin with your most recent experience. Include volunteer and U.S. Military Service. Describe the work you did as completely as possible. List each promotion separately. Explain any gaps between employment period. If more space is needed, use a separate sheet prepared in the same form and attach securely.

FROM (month/year) _____ TO (month/year) _____	EMPLOYER (BUSINESS OR AGENCY NAME) _____ ADDRESS/CITY/STATE _____	TITLE OF PRESENT POSITION _____ NAME OF SUPERVISOR _____	NO. EMPLOYEES SUPERVISED BY YOU _____ SUPERVISORS PHONE NO. _____
REASON FOR LEAVING _____ _____ _____ _____	DUTIES _____ _____ _____ _____		
FROM (month/year) _____ TO (month/year) _____	EMPLOYER (BUSINESS OR AGENCY NAME) _____ ADDRESS/CITY/STATE _____	TITLE OF PRESENT POSITION _____ NAME OF SUPERVISOR _____	NO. EMPLOYEES SUPERVISED BY YOU _____ SUPERVISORS PHONE NO. _____
REASON FOR LEAVING _____ _____ _____ _____	DUTIES _____ _____ _____ _____		
FROM (month/year) _____ TO (month/year) _____	EMPLOYER (BUSINESS OR AGENCY NAME) _____ ADDRESS/CITY/STATE _____	TITLE OF PRESENT POSITION _____ NAME OF SUPERVISOR _____	NO. EMPLOYEES SUPERVISED BY YOU _____ SUPERVISORS PHONE NO. _____
REASON FOR LEAVING _____ _____ _____ _____	DUTIES _____ _____ _____ _____		
FROM (month/year) _____ TO (month/year) _____	EMPLOYER (BUSINESS OR AGENCY NAME) _____ ADDRESS/CITY/STATE _____	TITLE OF PRESENT POSITION _____ NAME OF SUPERVISOR _____	NO. EMPLOYEES SUPERVISED BY YOU _____ SUPERVISORS PHONE NO. _____
REASON FOR LEAVING _____ _____ _____ _____	DUTIES _____ _____ _____ _____		

24 - Were you ever discharged or forced to resign from any position? YES NO If yes, explain: _____
 25 - Inquiry may be made of your former employers or last school you attended regarding your performance record. May we contact your present employer YES NO

26 - CERTIFICATE OF APPLICANT: I certify that all statements made in this application are true, and I agree and understand that misstatements or omissions of material facts herein may forfeit my right to any employment in the service of the City of Union City. X _____ Signature _____ Date _____

NAME: LAST _____ FIRST _____ MIDDLE _____ POSITION APPLIED FOR _____.

WE NEED THE FOLLOWING INFORMATION TO COMPLY WITH FEDERAL EQUAL OPPORTUNITY REQUIREMENTS. INFORMATION WILL BE KEPT CONFIDENTIAL AND USED ONLY FOR STATISTICAL PURPOSES TO EVALUATE EQUAL OPPORTUNITY EFFORTS. THIS INFORMATION IS VOLUNTARY. IF YOU OBJECT, YOU NEED NOT COMPLETE THIS SECTION.

27 - Are you age 40 or over? YES NO DATE _____

28 - Are you MALE FEMALE

29 - ETHNIC ORIGIN (Please check one)

- White: All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.
- Black: All persons having origins in any of the Black racial groups.
- Hispanic: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish Culture or origin, regardless of race.
- Asian or Pacific Islander. All persons, except Filipino, having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, and Samoa.
- American Indian or Alaskan Native: All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
- Filipino: Persons of Filipino ancestry or ethnic origin.

30 - HOW DID YOU LEARN ABOUT THE EMPLOYMENT OPPORTUNITY FOR WHICH YOU ARE APPLYING?

- Bulletin posted at City Hall
- Bulletin posted elsewhere (please specify)
- Newspaper help wanted ad (please specify)
- Radio Announcement
- Television Announcement
- City's Website (www.ci.union-city.ca.us)
- Other Website (please specify)
- Posting with a Minority Organization or Group (please specify)
- Posting with a Women's Organization or Group (please specify)

NAME: LAST _____ FIRST _____ MIDDLE _____ POSITION APPLIED FOR _____.

APPLICATION PROCEDURES

1. Please Complete the Entire Application

- a. The entire application must be completed.
- b. You may attach a resume, but you must still completely fill out the application.

2. Print, Sign and Mail or Deliver your Application

- c. Print the completed application on your local printer.
- d. Please check that all sections have been completed.
- e. Check carefully for errors. If you find any, go back and correct them before reprinting your application.
- f. Affix your signature the application where required.
- g. If the position you are applying for requires that you include a resume or other supplemental materials, include them with the application when you deliver or mail it to the City.
- h. Mail or deliver your completed, signed application and supporting materials to:

City of Union City
Personnel Department
34009 Alvarado-Niles Road
Union City, CA 94587

For Further Information

24-hour Job Hotline 510-471-3232 ext. 339

E-mail: union-city@ci.union-city.ca.us

URL: www.ci.union-city.ca.us

Union City Community & Recreation Services Department
PERTINENT INFORMATION SHEET

Name: _____
 Address: _____
 City: _____ Zip: _____

Birth Date: _____
 Phone / Cell: _____
 E-Mail: _____

Interested In	Participated In	Am Qualified to lead/teach		Interested In	Participated In	Am Qualified to lead/teach	
			Adult Sports				Martial Arts
			Arts and Crafts				Music / Singing
			Bicycle Repair / Bike Trips				Nature
			Ceramics & Pottery				Science
			Cooking				Sewing/Needlework
			Computers				Skateboarding / Rollerblading
			Creative or Industrial Arts				Sports Readiness & Skill Development
			Dancing – Children / Adults				Swimming
			Day Camp				Table Tennis & Badminton
			Drama				Teens
			Field Trips				Tennis
			Fitness & Training				Tiny Tots Program
			Games – Organized				Tutoring
			Golf				Youth Activities Program
			Health & Nutrition				Youth Sports

AVAILABILITY: 1. _____ School Year Only
 2. _____ Summer Only
 3. _____ All Year Round

DAYS AVAILABLE: (circle & add hours)
 Monday _____
 Tuesday _____
 Wednesday _____
 Thursday _____
 Friday _____
 Saturday _____
 Sunday _____

What date can you start work: _____
 When do you plan to leave this job: _____

Do you possess a current certification for:

First Aid Card: _____ No _____ Yes Expiration Date: _____
 Cardiopulmonary Resuscitation (CPR): _____ No _____ Yes Expiration Date: _____
 Life Guard Training: _____ No _____ Yes Expiration Date: _____
 Water Safety Instructor (WSI): _____ No _____ Yes Expiration Date: _____
 Automated External Defibrillator (AED): _____ No _____ Yes Expiration Date: _____
 Group Exercise or Personal Training: _____ No _____ Yes Expiration Date: _____

This position requires employees to be tested for Tuberculosis. Do you have a record available of a current negative TB Test (less than 6 months old)? _____ Yes _____ No If no, are you willing to get one? _____ Yes _____ No

List any other special certificates you possess: (Elementary Teaching Credential, etc.)

List any hobbies and/or special talents:

List all other paid and/or volunteer training or experience that you feel you would qualify you for the position for which you are applying:

