

**PUBLIC WORKS SEASONAL MAINTENANCE EMPLOYEE  
CITY OF ELLIS, KANSAS**

Department: Public Works  
Reports To: Public Works Director

Position Type: Seasonal Employee

*This description was approved: March 2, 2009*

**FLSA: Non-exempt  
ADA: Applicable  
OSHA: Blood borne Pathogens  
WORKING CONDITIONS:  
Hazardous Chemicals  
Adverse Weather  
Excessive Noise**

Under the supervision of the Public Works Director, the seasonal maintenance employee is a semi-skilled position performing duties associated with refuse collection, maintenance of parks, cemetery, streets, city facilities, water and wastewater.

*Examples of Work (Essential Functions)*

- Operates and maintains departmental equipment including mowers, weed eaters, trimmers and similar equipment vehicles;
- Mows City properties, parks, cemetery, water wells, wastewater treatment plant and road right of ways and other areas as designated;
- Assists with ground and building maintenance of all City properties;
- Keeps parks free of debris and refuse;
- Maintains and cleans all facilities within parks;
- Assists with refuse collection;
- Repairs & replaces street signs;
- Performs other duties as deemed necessary or assigned.

*Seasonal Maintenance Employee  
Position Requirements*

Experience: This is an entry-level position and no experience is required.

Age: Must be at least eighteen years of age or older.

Education: No requirement.

Technical Skills: Be able to understand and follow directions. Employee will be trained to operate equipment properly. Valid driver's license is required.

Problem Solving: Some independent problem solving is involved in this position. This employee encounters problems with safe and proper equipment use.

Decision-Making: Some independent decision making is involved in this position. This employee makes decisions about performing necessary repairs and performing daily duties in the safest and most efficient manner.

Supervision: This employee works with frequent supervision from the Public Works Director and job related decisions are reviewed.

Personal Relations: Daily contact with other departments and the general public.

Working Conditions: Manual labor is required. Some adverse working conditions exist within this position. Exposures to bloodborne pathogens, hazardous chemicals, heavy machinery, excessive noise, and all types of weather conditions are expected.

Physical Requirements: Physical exertion to manually move, lift, carry or push heavy objects. Climbing in and out of ditches, up and down ladders. Bending, stooping, and shoveling in ditches. Lying and crawling under machinery. The ability to operate departmental equipment is required daily in this position. The ability to express or exchange ideas by means of verbal communication. Conveying detailed or important instructions to other employees and the general public.

*The specific statements shown in each section of this description are not intended to be all-inclusive. They represent typical elements and criteria considered necessary to successfully perform the job.*

**CITY OF ELLIS, KANSAS  
EMPLOYMENT APPLICATION**

815 Jefferson Street  
Ellis, Ks 67637  
Phone 785.726.4812  
Fax 785.726.4159

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**The City of Ellis is an EQUAL OPPORTUNITY EMPLOYER**

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(Please PRINT clearly)

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

May we contact you at work?    \_\_\_ Yes    \_\_\_ No  
PART TIME APPLICANTS are you 16 or over?    \_\_\_ Yes    \_\_\_ No  
FULL TIME APPLICANTS are you 18 or over?    \_\_\_ Yes    \_\_\_ No  
POLICE APPLICANTS are you 21 or over?    \_\_\_ Yes    \_\_\_ No

POSITION(S) APPLIED FOR \_\_\_\_\_  
WOULD YOU ACCEPT FULL TIME OR PART TIME WORK? \_\_\_\_\_  
ON WHAT DATE WOULD YOU BE ELIGIBLE FOR WORK? \_\_\_\_\_  
DRIVERS LICENSE NO. \_\_\_\_\_ STATE \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_  
DO YOU HOLD COMMERCIAL DRIVERS LICENSE (CDL)? \_\_\_\_\_  
ARE YOU ELIGIBLE TO OBTAIN A CDL LICENSE? \_\_\_\_\_

List any relatives currently employed by the City of Ellis

Name	Relationship	Department
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***Education & Training***

High School: \_\_\_\_\_ Location: \_\_\_\_\_  
Graduated:    \_\_\_ Yes    \_\_\_ No                      GED:    \_\_\_ Yes    \_\_\_ No  
College: \_\_\_\_\_ Location: \_\_\_\_\_  
                  Major \_\_\_\_\_ Degree \_\_\_\_\_                      Graduated:    \_\_\_ Yes    \_\_\_ No  
Trade or Technical School \_\_\_\_\_                      Completed:    \_\_\_ Yes    \_\_\_ No

### ***Special Training & Skills***

Please list additional training or skills or other information you feel may be helpful to us in considering your application.

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### ***Employment History***

List the last three jobs you have held, beginning with the most recent.

Employer:
Address:
Phone:
Job Title:
Supervisor:
Dates Employed:    from (mm/yy) _____ to (mm/yy) _____
May we contact?    ___ Yes    ___ No    If yes, phone number _____
Employment was?    ___ Full Time    ___ Part-time
List of job duties:
Reason for leaving:

Employer
Address
Phone
Job Title
Supervisor
Dates Employed:    from (mm/yy) _____ to (mm/yy) _____
May we contact?    ___ Yes    ___ No    If yes, phone number _____
Employment was?    ___ Full Time    ___ Part-time
List of job duties
Reason for leaving

Employer:
Address:
Phone:
Job Title:
Supervisor:
Dates Employed:    from (mm/yy) _____ to (mm/yy) _____
May we contact?    ___ Yes    ___ No    If yes, phone number _____
Employment was?    ___ Full Time            ___ Part-time
List of job duties:
Reason for leaving:

***Past Incidents***

Have you pleaded guilty, no contest to, or have been convicted of 1) a felony, or 2) a lesser crime which involved theft, dishonesty or violence in the past seven (7) years?

If yes, describe the nature of the offense(s) and the county and state where convicted.

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Have you had your driver’s license suspended or revoked within the past five (5) years?

If yes, list the state which suspended or revoke the license and the reason(s) for each suspension or revocation.

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Have you been disciplined or fired by a previous employer in the past five (5) years?

If yes, why?

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**PERSONAL REFERENCES (Not Former Employers or Relatives)**

NAME	ADDRESS	CITY/STATE	TELEPHONE

Please read carefully and sign below.

**AUTHORIZATION**

I hereby authorize the City of Ellis to investigate all statements made in this application, review my driving and criminal records, and to contact my previous employers. I understand that any false statements made herein may eliminate my application from employment consideration, or if discovered after hire, may result in my discharge from employment.

If hired, I will conform to the policies, rules and regulations of the City of Ellis, including, the residency requirements, for full time employees who must live within thirty miles of Ellis.

For certain positions I agree to submit to a complete physical examination including drug testing if requested by the City. I also agree to sign the "*Authorization to Release Information*" form if so requested by the city.

And

**ACKNOWLEDGEMENT OF AT WILL EMPLOYMENT**

I acknowledge that both my employment and my compensation can be terminated and/or changed at will, without prior notice at the sole option of the City of Ellis. I understand that no representative of the City of Ellis has any authority to enter into any agreement hiring me for a specified period of time or to make any agreement contrary to this acknowledgment.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY:**

Interview	Date	Comments	
Testing			
Tests	Date	Score/Rating	Comments
Reference Checks			
Employer 1:			
Employer 2:			
Employer 3:			
Employer 4:			

Applicant number: \_\_\_\_\_ Employee Number: \_\_\_\_\_ Hire Date: \_\_\_\_\_

Position: \_\_\_\_\_ Starting Hourly Wage: \_\_\_\_\_

Notes: \_\_\_\_\_