



1200 East Broad Street, 2nd Floor Human Resources
Mansfield, Texas 76063
Telephone: 817-276-4267
Fax: 817-473-7487
Email: applymansfield@mansfieldtexas.gov

JOB CLASSIFICATION: Kids Zone Camp Counselor **SALARY:** \$12.00/Hour
DEPARTMENT: Parks and Recreation MAC **Part-time /Seasonal / Non-Exempt**

JOB DESCRIPTION:

Kids Zone Camp Counselors will lead children in a fast-paced weekly themed day camp environment, such as arts & crafts, field trips, swimming, sports, and other recreational activities. They will be responsible for the direct care, safety and supervision of children ages 6-11.

EXAMPLES OF WORK TO BE PERFORMED:

- Supervise, provide care for, and be the primary role model for a group of campers ages 6-11.
- Create a safe, supportive, active, engaged, and fun environment for campers.
- Provide continuous, direct supervision during structured and unstructured activities, including swimming and out-of-the-building activities.
- Ensure camper's safety on field trips and excursions.
- Practice personal leadership skills.
- Set clear and consistent limits and resolve behavioral problems with assistance from supervisors.
- Model appropriate behavior for campers.
- Follow and execute activities according to a pre-designed daily schedule.
- Lead a group of up to 12 campers with a fun, positive, and outgoing attitude.
- Interact with children, parents/guardians, and coworkers in a professional manner at all times.
- Understand and adhere to standard operating procedures for camp.
- Operate city-owned 15-passenger van for local day trips and field trips, if age 19 or older.
- Attend mandatory staff trainings and meetings.
- Perform basic office duties such as answering phones, making copies, filing, and gathering data, as needed.
- Perform other assigned duties as required.

OTHER DUTIES:

Please note this job description is not designed to cover or contact a comprehensive listing of activities, duties or responsibilities that are required of the employee for this job. Duties, responsibilities and activities may change at any time with or without notice.

REQUIRED KNOWLEDGE SKILLS AND ABILITIES:

- Must be at least 18 years of age
- Must possess valid Texas drivers' license
- Must be able to commit to at least 9 weeks of camp. Camp is held May 29 – August 11.
- Mandatory orientation and training is required prior to the start of camp. Training will be held in May prior to camp.
- Ability to work well in teams.
- Ability to be silly and use your imagination to play.
- Ability to juggle attention to one camper while supervising large groups.
- Enthusiasm, flexibility, and ability to improvise is a must.
- Good communication skills, both written and verbal.
- Must have reliable transportation.
- Must be able to work flexible hours. Camp is held Monday-Friday from 7:30a-6p. Occasional weekend hours may be required.
- CPR certified preferred.
- Experience with cash handling procedures.
- Experience with supervising, instructing and providing activities for children ages 6-11.
- Knowledge of Microsoft Windows and Windows applications.

ESSENTIAL PHYSICAL FUNCTIONS:

1. The physical activity of this position

- Stooping. Bending body downward and forward by bending spine at the waist.
- Kneeling. Bending legs at knee to come to a rest on knee or knees.
- Crouching. Bending the body downward and forward by bending leg and spine.
- Crawling. Moving about on hands and knees or hands and feet.
- Reaching. Extending hand(s) and arm(s) in any direction.
- Standing. Particularly for sustained periods of time.
- Walking. Moving about on foot to accomplish tasks, particularly for long distances or moving from one work site to another.
- Pushing. Using upper extremities to press against something with steady force in order to thrust forward, downward or outward.
- Pulling. Using upper extremities to exert force in order to draw, haul or tug objects in a sustained motion.
- Lifting. Raising objects from a lower to a higher position or moving objects horizontally from position-to-position. This factor is important if it occurs to a considerable degree and requires substantial use of upper extremities and back muscles.
- Fingering. Picking, pinching, typing or otherwise working, primarily with fingers rather than with the whole hand as in handling.
- Grasping. Applying pressure to an object with the fingers and palm.
- Feeling. Perceiving attributes of objects, such as size, shape, temperature or texture by touching with skin, particularly that of fingertips.
- Talking. Expressing or exchanging ideas by means of the spoken word. Those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.
- Hearing. Perceiving the nature of sounds at normal speaking levels with or without correction. Ability to receive detailed information through oral communication, and to make the discriminations in sound.

- Repetitive motion. Substantial movements (motions) of the wrists, hands, and/or fingers.

2. The physical requirements of this position

- Light work. Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or a negligible amount of force constantly to move objects.

3. The visual acuity requirements including color, depth perception, and field vision.

- The worker is required to have visual acuity to determine the accuracy, neatness, and thoroughness of the work assigned (i.e., custodial, food services, general laborer, etc.) or to make general observations of facilities or structures

4. The conditions the worker will be subject to in this position

- The worker is subject to environmental conditions. Protection from weather conditions but not necessarily from temperature changes.
- The worker is subject to both environmental conditions. Activities occur inside and outside.
- The worker is subject to extreme heat. Temperatures above 100° for periods of more than one hour. Consideration should be given to the effect of other environmental conditions, such as wind and humidity.
- The worker is subject to noise. There is sufficient noise to cause the worker to shout in order to be heard above ambient noise level.

AMERICANS WITH DISABILITIES

The City of Mansfield complies with the Americans with Disabilities Act of 1990 and it is our policy to ensure that no person is discriminated against based on their disability. The City of Mansfield offers equal employment opportunity to qualified individuals and strictly prohibits the discrimination against qualified individuals on the basis of disability. The City of Mansfield shall provide reasonable accommodations to applicants and employees who are otherwise qualified to perform the essential job duties when doing so does not create an undue hardship for the city.

EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

The City of Mansfield is an Equal Opportunity Employer who is committed to hiring and retaining highly qualified persons and a diverse workforce. The City of Mansfield is mandated by federal law to provide a drug-free working environment for the safety of its employees and the public. All employment is contingent upon passing a post offer pre-employment drug test and/or physical. It is the policy of the city not to discriminate against any person in recruitment, examination, appointment, training, promotion, discipline or any other aspect of personnel administration because of religious opinions or affiliations, membership or non-membership in employee organizations, or because of race, color, national origin, ancestry, marital status, age, gender, veteran, disability or any other basis prohibited by federal, state, or local laws.



APPLICATION FOR EMPLOYMENT

City of Mansfield
Attn: Human Resources
 1200 E. Broad Street, Mansfield, Texas 76063
 Phone: (817) 276-4267 FAX: (817) 473-7487
 Email: applymansfield@mansfieldtexas.gov

Please print. All information must be legible. Application must be completed in full or will not be considered. Resumes may be attached to completed application. Applicants requiring reasonable accommodation to the application and/or interview process should contact the Human Resources Department for assistance. Equal access to programs, services, and employment is available to all qualified persons. The City of Mansfield is an Equal Opportunity Employer.

Position applied for: _____ Date: _____ Salary Expected: _____

NAME: _____
(Last) (First) (Middle)

ADDRESS: _____
(Street) (City) (State) (Zip)

E-MAIL ADDRESS: _____

TELEPHONE: (Home) _____ (Work) _____ (Cell) _____

Please check all that apply: Do you want Regular Full Time Regular Part Time Temporary Full Time
 Temporary Part Time Seasonal (as needed)

How did you learn of this position? Newspaper* Internet* Professional Magazine* Employee Referral
 HR Office Employment Agency Texas Workforce Commission (employment office)

*Specify which _____

Do you have a valid Texas Driver's License? No Yes Type of License: Operator CDL Chauffer
 License Number: _____ Expiration Date: _____

Does anyone related to you (by blood or marriage) work here or is currently a member of the City Council? Yes No
 City Board Commissions? Yes No If yes, list name, their position, and relationship:

Have you ever worked here before? Yes No If yes, give dates and position held: _____

Are you legally eligible for employment in the United States of America? Yes No

Answering "yes" to the following question will not be an automatic bar to employment. Factors such as date of the offense, seriousness, and nature of the violation, rehabilitation and position applied for will be taken into consideration.

Have you ever plead "guilty" or "no contest" (*nolo contendere*) to, or been convicted of a crime? Yes No
 If you answered "yes," please provide the date(s), location, and details: _____

Have you served in the armed forces, armed forces reserve, or national guard of the United States of America? Yes No
 If "yes," please complete the following: BRANCH _____ DATE ENTERED _____
 DATE OF DISCHARGE _____ RANK AT DISCHARGE _____
 LIST DUTIES AND TRAINING _____

ARE YOU CURRENTLY A MEMBER OF THE RESERVES OR NATIONAL GUARD? Yes No

EMPLOYMENT HISTORY

List all periods of employment or volunteer activities. If currently UNEMPLOYED, write "unemployed" in the CURRENT

EMPLOYER block and go to the next block. Start with your current status and work backward. If you need additional space, use a plain sheet of paper using the format below for each additional position. You may attach a resume or other documents. COMPLETE EACH SECTION FULLY.

CURRENT EMPLOYER: _____

BUSINESS ADDRESS: _____ **PHONE NO.** _____

JOB TITLE: _____ **SUPERVISOR'S NAME:** _____

DATES OF EMPLOYMENT: From _____ To _____

REASON FOR DESIRING CHANGE: _____

STARTING SALARY: \$ _____ **ENDING SALARY** \$ _____ **MAY WE CONTACT THIS EMPLOYER?** _____

YOUR DUTIES: _____

LAST EMPLOYER: _____

BUSINESS ADDRESS: _____ **PHONE NO.** _____

JOB TITLE: _____ **SUPERVISOR'S NAME:** _____

DATES OF EMPLOYMENT: From _____ To _____

REASON FOR LEAVING: _____

STARTING SALARY: \$ _____ **ENDING SALARY** \$ _____ **MAY WE CONTACT THIS EMPLOYER?** _____

YOUR DUTIES: _____

NEXT PREVIOUS EMPLOYER: _____

BUSINESS ADDRESS: _____ **PHONE NO.** _____

JOB TITLE: _____ **SUPERVISOR'S NAME:** _____

DATES OF EMPLOYMENT: From _____ To _____

REASON FOR LEAVING: _____

STARTING SALARY: \$ _____ **ENDING SALARY** \$ _____ **MAY WE CONTACT THIS EMPLOYER?** _____

YOUR DUTIES: _____

NEXT PREVIOUS EMPLOYER: _____

BUSINESS ADDRESS: _____ **PHONE NO.** _____

JOB TITLE: _____ **SUPERVISOR'S NAME:** _____

DATES OF EMPLOYMENT: From _____ To _____

REASON FOR LEAVING: _____

STARTING SALARY: \$ _____ **ENDING SALARY** \$ _____ **MAY WE CONTACT THIS EMPLOYER?** _____

YOUR DUTIES: _____

PLEASE EXPLAIN IN DETAIL ANY TIME LAPSES DUE TO UNEMPLOYMENT OR OTHER REASONS.

LIST LICENSES or CERTIFICATIONS RELATED TO THE JOB FOR WHICH YOU ARE APPLYING.

LIST PROFESSIONAL OR TECHNICAL LICENSES, REGISTRATION, CERTIFICATES, OR MEMBERSHIPS YOU POSSESS.

CHECK ALL SKILLS OR ABILITIES, BELOW, THAT YOU POSSESS THAT RELATE TO THE POSITION FOR WHICH YOU ARE APPLYING.

Typing / Speed _____ WPM Ten-Key Calculator
 Computer List programs in which proficient: _____

FOR TRADES JOBS ONLY:

- Truck List type(s): _____
- Backhoe List type(s): _____
- Grader List type(s): _____
- Dozer List type(s): _____
- Tractor List type(s): _____
- Mower List type(s): _____
- Other equipment List type(s): _____

EDUCATION

SCHOOL	NAME AND LOCATION	FROM	TO	GRADUATED/COMPLETED
High School				Diploma GED
Trade School				Course of Study _____ Certification _____
College				Degree obtained _____ Major _____ Minor _____
Other				

ACKNOWLEDGEMENT

READ THE FOLLOWING CAREFULLY BEFORE SIGNING

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from employment with the City of Mansfield whenever it is discovered.

I give the City of Mansfield the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the City of Mansfield and its representatives for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information.

The City of Mansfield does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for only six (6) months for the position for which application is made. I acknowledge that this application, once submitted to the City of Mansfield, becomes the property of the City of Mansfield.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the City of Mansfield reserves the same right to terminate my employment during the probationary period at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the City of Mansfield, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is the policy of the City of Mansfield not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant: _____ Date: _____



Human Resources
1200 East Broad Street
Mansfield, Texas 76063
(817) 276-4267

READ CAREFULLY BEFORE SIGNING

Prior to employment, applicants will be investigated as to convictions for prior criminal offenses. A prior conviction will not automatically disqualify an applicant for employment and will be considered only as it relates to the job applied for and as it may assist in determining character traits of the applicant. However, falsification of the application will result in disqualification for employment.

All applicants for full time or regular part-time positions are requested to take a physical examination, INCLUDING DRUG SCREENING.

All job offers are contingent on the successful completion of reference checks, police check, driver's license check (if applicable), and physical exam (if applicable).

All applications become the property of the *City of Mansfield*. Applications will be kept on file six months.

I hereby request and authorize you to render any information regarding my employment, character, qualifications, habits, reputation, credit, medical history, past record of performance, or any other pertinent information to the City of Mansfield. Any information furnished is at my express request and for my benefit.

I hold said representative or agent furnishing aforesaid information harmless, and I do hereby release them from any and all liability for damage of whatsoever nature because of furnishing such information.

I further understand that this information will be "confidential" between the City of Mansfield and all other parties involved.

Signature of Applicant

Date

Print Name: _____ Today's Date: _____
Last First Middle Maiden Month Day Year

SUPPLEMENTAL INFORMATION CARD

The information on this card is used for statistical reporting to various regulatory agencies only. It will be detached from your application and will in no way be used in consideration of your application for employment.

Position applying: _____

Race/Sex: Female Male

- A. American Indian or Alaska Native
- B. Asian
- C. Black or African American
- D. Hispanic or Latino
- E. Native Hawaiian or Other Pacific Islander
- F. Two or more races
- G. White

How did you learn of this position?

- Dallas Morning News
- Employee Referral
- Fort Worth Star Telegram
- HR Office
- Mansfield News-Mirror
- Professional Magazine*
- Texas Workforce Commission
- Other * _____

Birth Date: _____
Month Day Year

Internet Site

- Career Builder
- City
- Monster
- TML
- Other *

Specify Which:

- _____
- _____
- _____
- Other *

Birthplace: _____ U.S. Citizen Yes No

Have you previously worked for the City? No Yes If yes, when? _____
Mo. Year to Mo. Year

Department: _____ Position: _____

Under what other names have you been employed? _____



Applicant Notification / Release of Information

In connection with my application for employment, I understand that investigative inquiries on my background, in accordance with the Fair Credit Reporting Act and all state and federal laws, are to be made on me, including information as to my personal character, abilities, work habits, mode of living, residency, general reputation, performance, experience, and other qualities pertinent to my qualifications for employment, including reasons for termination of past employment.

I understand that prospective employer and/or First Check may make inquiries, including but not limited to my consumer credit history, education, professional licensing, and criminal history and driving history. Furthermore, I understand that prospective employer and/or First Check may request information from various federal, state and other agencies that maintain records concerning my past driving history, credit history, criminal history, military history, civil and other experiences.

I understand that according to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained by my perspective employer from a Consumer Reporting Agency. Upon written request, I will be informed whether an investigative consumer report was requested and will be given full information as to the nature and the scope of the investigation, as well as the name of the reporting agency or sources of information.

I authorize without reservation, any party (including, but not limited to, employers, law enforcement agencies, state agencies, institutions and private information bureaus or repositories) contacted by prospective employer and/or First Check to furnish any or all of the above mentioned information. In addition, I hereby release First Check and prospective employer from any and all liability for damages arising from the investigation and disclosure of the requested information. I further release and discharge all liability from all companies, agencies, officials, officers, employees and other persons, who, in good faith provide to prospective employer and/or First Check the above mentioned information as requested, in order to successfully complete a background investigation for my application of employment. I will allow a photocopy of this authorization to be as valid as the original.

Print Full Name: _____

Social Security _____ *Date of Birth _____ / _____ / _____

Current Address _____

City/State/Zip _____

Driver's License # _____ State _____

Prospective Employer _____

Applicants Signature _____

** Notary Signature _____ Printed _____

State _____ County _____ Commission Expires _____

* Date of birth is being requested only for the purpose of identification in obtaining accurate retrieval of records, and will not be used for discriminatory purposes. ** Only when requested