



# Village of Cridersville

An Equal Opportunity Employer  
Position Description

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**Position Title:** Maintenance/ Grounds Keeper

**Name:**

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**Employment Status:** Full-Time    **Department:** Streets, Water, Wastewater Plant & Parks

**FLSA Status:** Non Exempt

**Reports to:** Village Administrator

**Pay Status:** Resolution Starting pay \$18.00

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**Qualifications:** Any combination of training and work experience which indicates the possessions of the skills and abilities listed below. An example of acceptable:

Any combination of training and experience which evidences the basic knowledge of safety practices and procedures, street maintenance, the operation of equipment, and/or the operation and maintenance of treatment plant and related facilities; or equivalent.

**Licensure or Certification requirements:**

Valid Ohio Driver's license. You must possess or obtain an Ohio Department of Agriculture license along with two categories within 6 month of hire date.

**Essential Functions of the Position:**

1. Maintenance and repair of the parks and park equipment, public buildings, grounds, streets, street signs (e.g. mow grass, cut weeds, landscapes, erects street signs, pain traffic lines, install guardrails, patch roadways, seal cracks in roadways, clean and repair storm sewers, clean ditches, plow snow, trims and cut trees. Etc.)
2. Maintenance and repair of the water and wastewater treatment systems including water distribution and sewer collections system, operation of water and wastewater plants depending on certification; read meters and gauges and make operating adjustments and minor repairs to the plant equipment; regulates flow of water, raw and treated sewage between various stages of treatment process; collects effluent samples and perform standardized tests ; cleans equipment; measures and records sludge levels from tanks; collects samples for analysis; flushes plugged lines; reads meters and records readings to determine consistency of readings and reports inconsistencies; responsible for reading, repairing and installing water meters.



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3. Performs facility, equipment, and supplies functions; performs preventive maintenance of facility and equipment; performs routine cleaning and maintenance of facility and equipment; mops and sweeps floors; performs routine maintenance and minor repair of vehicles and equipment.
4. Maintains required licensure and certification.
5. Meets all job safety requirements and all applicable OSHA safety standards that pertain to essential functions.
6. Demonstrates regular and predictable attendance.

## **Other Duties and Responsibilities:**

1. Positions requires on-call status, weekends and overtime work determined by the supervisor.
2. Performs other related duties as assigned.

## **Minimum acceptable characteristics:**

**Knowledge of:** village policies and procedures; safety practices and procedures; vehicles; tools, equipment and supplies used in street construction, maintenance and repair; techniques and methods used in grounds maintenance activities; utility construction, maintenance and repair, techniques and methods used in street maintenance repair; water distribution systems construction, maintenance and repair, water treatment plant regulations; wastewater treatment regulations; lab procedures; water meter maintenance and repair; custodial methods and techniques; proper lofting techniques; snow and ice removal; geographic layout of jurisdiction.

**Skills in:** motor vehicle operation; computer operation; snowplow operation use of bench and/or hand tools.

**Ability to:** carry out instructions in written, oral or picture form; determine material and equipment needs; prepare accurate documentation; communicate effectively; develop and maintain effective working relationships; perform heavy manual labor for extended periods of time in often adverse weather conditions; use hand tools in performing routine equipment maintenance and repair; travels to and gain access to work site.



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## **Equipment operated:**

Dump truck/snow plow, golf cart, pickup truck, car, high pressure jet truck, hand power tools, hand tools, skid steer, tractor, mower, loader, backhoe.

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This position description in no manner states or implies that these are the only duties and responsibilities to be performed by the position incumbent. My signature below signifies that I have reviewed and understand the contents of my position description.

\_\_\_\_\_

(Approval of Appointing Authority )

(Date)

\_\_\_\_\_

Applicants Signature

(Date)

# Village of Cridersville

## PERSONAL INFORMATION

**FULL NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
First Middle Last

**ADDRESS:** \_\_\_\_\_  
Street Address Apt/Suite  
\_\_\_\_\_  
City State Zip Code

**E-MAIL:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**SOCIAL SECURITY NUMBER (SSN):** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**DATE AVAILABLE:** \_\_\_\_\_ **DESIRED PAY:** \$ \_\_\_\_\_  HOUR  SALARY

**POSITION APPLIED FOR:** \_\_\_\_\_

**EMPLOYMENT DESIRED:**  FULL-TIME  PART-TIME  SEASONAL

## EMPLOYMENT ELIGIBILITY

**ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S.?**  YES  NO\*

**HAVE YOU EVER WORKED FOR THIS EMPLOYER?**  YES\*  NO

**\*IF YES, WRITE THE START AND END DATES:** \_\_\_\_\_

**HAVE YOU EVER BEEN CONVICTED OF A FELONY?**  YES\*  NO

**\*IF YES, PLEASE EXPLAIN:** \_\_\_\_\_

## EDUCATION

**HIGH SCHOOL:** \_\_\_\_\_ **CITY / STATE:** \_\_\_\_\_

**FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

**GRADUATE?**  YES  NO **DIPLOMA:** \_\_\_\_\_

**COLLEGE:** \_\_\_\_\_ **CITY / STATE:** \_\_\_\_\_

**FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

GRADUATE?  YES  NO DEGREE: \_\_\_\_\_

OTHER: \_\_\_\_\_ CITY / STATE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

DEGREE/CERTIFICATION: \_\_\_\_\_

OTHER: \_\_\_\_\_ CITY / STATE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

DEGREE/CERTIFICATION: \_\_\_\_\_

**LICENSES, CERTIFICATIONS, REGISTRATIONS**

Do you possess a valid Driver's License?  Please list state and license number

\_\_\_\_\_

Do you Possess a valid Commercial Driver's License?  Please list state and license number

\_\_\_\_\_

Professional/Technical Licenses and Registrations

Type	State	Number	Expiation date (if any)

**PREVIOUS EMPLOYMENT**

EMPLOYER 1: \_\_\_\_\_  
Company / Individual

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street Address Apt/Suite

\_\_\_\_\_ City State Zip Code

STARTING PAY: \$ \_\_\_\_\_  HOUR  SALARY ENDING PAY: \$ \_\_\_\_\_  HOUR  SALARY

JOB TITLE: \_\_\_\_\_ RESPONSIBILITIES: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

**EMPLOYER 2:** \_\_\_\_\_  
Company / Individual

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street Address Apt/Suite

\_\_\_\_\_ City State Zip Code

STARTING PAY: \$ \_\_\_\_\_  HOUR  SALARY ENDING PAY: \$ \_\_\_\_\_  HOUR  SALARY

JOB TITLE: \_\_\_\_\_ RESPONSIBILITIES: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

**EMPLOYER 3:** \_\_\_\_\_  
Company / Individual

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street Address Apt/Suite

\_\_\_\_\_ City State Zip Code

STARTING PAY: \$ \_\_\_\_\_  HOUR  SALARY ENDING PAY: \$ \_\_\_\_\_  HOUR  SALARY

JOB TITLE: \_\_\_\_\_ RESPONSIBILITIES: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

**REFERENCES**  
(PROFESSIONAL ONLY)

**FULL NAME:** \_\_\_\_\_ **RELATIONSHIP:** \_\_\_\_\_  
First Last

**COMPANY:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**FULL NAME:** \_\_\_\_\_ **RELATIONSHIP:** \_\_\_\_\_  
First Last

**COMPANY:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**FULL NAME:** \_\_\_\_\_ **RELATIONSHIP:** \_\_\_\_\_  
First Last

**COMPANY:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**MILITARY SERVICE**

**ARE YOU A VETERAN?**  YES  NO

**BRANCH:** \_\_\_\_\_ **RANK AT DISCHARGE:** \_\_\_\_\_

**FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

**TYPE OF DISCHARGE:** \_\_\_\_\_

**IF NOT HONORABLE, PLEASE EXPLAIN:** \_\_\_\_\_

**CERTIFICATION**

I certify that all of the information furnished in this employment application is true, accurate and complete to the best of my knowledge. I authorize investigation of all statements contained in this application. I understand that any misrepresentation or falsification of the information provided may lead to withdrawal of an employment offer or termination following employment.

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Print Name

**BACKGROUND/ REFERENCE CHECK CONSENT**

I understand that a background check may be requires prior to employment, and that drug testing may be required. I hereby waive any provisions of law forbidding colleges or universities which I attended, or past employers, from disclosing and information which they acquire relevant to my employment. I consent that they may disclose such information to the employer for recruitment purposes.

I hereby give consent and authorize the employer to conduct, either by itself or through the utilization of an outside agency, any investigation the employer deems necessary.

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Applicants signature

Date

**FAIR CREDIT REPORTING ACT NOTICE AND AUTHORIZATION**

In order to process your application, or during the course of your employment, a consumer report may be obtained on you for employment purposes. It may be an investigative consumer report that includes information regarding your character, general reputation, personal characteristics and mode of living. Such report may also be necessary in relation to and investigation regarding allegations of sexual harassment, discrimination or disciplinary charges associated with your employment. The employer may utilize outside organizations to obtain consumer report and/or to conduct investigations. If any investigation consumer report is obtained you have the right to request disclosure of the nature and scope of the report, which involves personal interviews with sources such as your neighbors, friends or associates.

I hereby authorize the employer to obtain consumer report on me for employment purposes to conduct investigations as outlines above.

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Applicants signature

Date

**CONDITIONAL AND POST-EMPLOYMENT MEDICAL EXAMINATION AND DRUG TESTING CONSENT FORM**

The applicant understands and acknowledges that the offer of employment made to the applicant is conditional upon successful completion of a medical examination. Such examination will be performed by a physician of the employer’s choice. As part of this medical the applicant may be required to submit urine, hair or other samples which may be subjected to tests for illegal drug use or substance abuse. The applicant shall not be employed by the employer if the applicant fails these tests or otherwise determined to be physically incapable of performing the essential functions of the conditionally offered position, with reasonable accommodation, if necessary.

If the applicant passes these tests and is hired, the employer reserves the right to require the individual to submit to periodic medical examinations, including reasonable suspicion tests for

illegal drug use, alcohol abuse, or substance abuse. The applicant waives any right to object to such examinations and testing after the applicant becomes employed by the employer.

In the event that the applicant's health or physical abilities become an issue during employment, the applicant authorizes the employer to view medical diagnosis and prescriptions records relating to the applicant's fitness for the duty or ability to safely perform essential functions of the job.

By signing this document the applicant consents to submit to the foregoing tests and procedures, and agrees that he or she has no cause of action against the employer arising from the issues. If the applicant refuses to consent to the aforementioned tests and procedures the applicant shall not be hired.

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Applicants Signature

Date

<b>DISCLAIMER</b>
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Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.

Please complete each section EVEN IF you decide to attach a resume.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

**APPLICANTS SIGNATURE** \_\_\_\_\_

**PRINT NAME** \_\_\_\_\_

**Date** \_\_\_\_\_



Asian/Pacific Islanders: Persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands. This area includes China, Japan, Korea, the Philippine Islands and Samoa.

<b>VETERAN &amp; DISABILITY STATUS</b>
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Veteran Status: Are you a veteran?    Yes    No

Vietnam-Era Veteran: Any veteran of the armed forces who, between August 5, 1964 and May 7, 1975 served on active duty for 181 consecutive days.

Dessert Storm/ Shield Veteran

Other Military Service, please explain: \_\_\_\_\_

Disabled Veteran: Any veteran entitles to disability compensation through the Veterans Administration for a disability rated at 30% or more; or any veteran discharged or released from active duty for a disability or aggravated in the line of duty.

Disabled: Any individual with a physical or mental impairment which substantially limits one or more of the major life activities of the individual.