

**TOWN OF BASIN POSITION DESCRIPTION
SEASONAL GROUNDS MAINTENANCE**

Position Title: Laborer - Grounds Maintenance
Department: Public Works
Reports To: Public Works Foreman
Hourly: 15.00/hour, paid biweekly.

JOB SUMMARY: Under the supervision of the Public Works Foreman, the Grounds Maintenance worker performs a variety of entry-level duties related to maintenance of municipally-owned grounds such as parks and cemetery.

ESSENTIAL DUTIES AND RESPONSIBILITIES:

- Operates mowing equipment, mows and trims grass, bushes and shrubs; assists in pruning activities on trees, shrubs and plants.
- General maintenance duties include operating power and push mowers and motorized weed trimmers to cut grass and weeds around trees.
- Performs general landscape and gardening duties; plants, trims, and maintains trees, waters lawns; transplants trees, shrubs, bushes, grass, flowers, etc., as directed to develop attractive parks and grounds.
- Operates sprinkler system as directed.
- Performs related duties as required.

SKILLS, KNOWLEDGE, AND ABILITIES: Some knowledge of equipment such as mowers, string trimmers, etc., sprinkler system; of hazards and related safety precautions associated with equipment operations; of interpersonal communication skills. Skill in the operation of various types of light equipment. Ability to read and interpret documents such as safety rules, operating and maintenance instructions, ability to communicate verbally and in writing; ability to develop effective working relationships with supervisor, subordinates and the public.

PHYSICAL DEMANDS: Tasks require a variety of physical activities, generally involving muscular strain, such as walking, standing, stooping, sitting, reaching, lifting, etc. Talking, hearing and seeing are essential to the performance of the job. Daily exposure to weather extremes and seasonal conditions. Common eye, hand, finger dexterity exist. Mental application utilizes memory for details, verbal instructions, discriminating thinking.

SPECIAL QUALIFICATIONS: Must possess a valid Driver's License with no restrictions.

The Town of Basin is an equal opportunity employer. Any applicant/employee with a disability as defined in the American with Disabilities Act may request an accommodation to perform the functions of this position. Requests should be directed to the immediate supervisor.

The duties listed above are intended only as illustrations of the various types of work performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related, or a logical assignment to the position.

The job description does not constitute an employment agreement between the employer and the employee and is subject to change by the employer as the needs of the employer and requirements of the job change.

TOWN OF BASIN

P.O. Box 599
Basin, WY 82410
(307)568-3331

EMPLOYMENT APPLICATION

PLEASE TYPE OR PRINT USING BLACK INK

Date: _____ 20____

Positions desired: <div style="text-align: right; margin-right: 20px;"> 1. _____ 2. _____ </div>
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Name: _____

(Last)
(First)
(Middle)

Address: Street City State Zip Code

() _____
Telephone Number

EDUCATION AND TRAINING DATA

Circle highest grade completed: 7 8 9 10 11 12 or GED College: 1 2 3 4 5 6

Name and Location of Last Elementary or High School Attended: _____

Name & Location of College, and/or Vocational Schools Attended	Dates Attended		Course of Study	Graduate?	Degree or Certificate
	From:	To:			

List any apprenticeships, internships, trade schools, and military schools, completed or not:

Name of School or Apprenticeship	Dates Attended		Employer & Address	Type of Training	Graduate?
	From:	To:			

Please list any additional training, and/or scholastic honors: _____

List all equipment/machines that you can operate. After each piece of equipment, list the number of years experience you have had with that piece of equipment:

Other Skills: _____

Licenses or Certificates Held: _____

MILITARY DATA

Are you a Veteran of The Armed Forces of the United States? Yes No

If so, please attach a copy of your form DD 214

Military Service: From _____ To _____

EMPLOYMENT DATA

LIST ALL EMPLOYMENT EXPERIENCE STARTING WITH PRESENT OR MOST RECENT EMPLOYER FIRST.

Most recent or present Employer:

Name of Employer: _____ From ___/___ To ___/___

Address: _____

Telephone Number: _____

Your Title: _____

Salary (Monthly or Hourly) _____
Beginning Ending

Describe in detail your duties and responsibilities: _____

Number and kind of employees you supervised: _____

Your Supervisor: _____ May we contact? Yes No

Reason for Leaving: _____

Next Previous Employer:

Name of Employer: _____ From ___/___/___ To ___/___/___

Address: _____

Telephone Number: _____

Your Title: _____

Salary (Monthly or Hourly) _____
Beginning Ending

Describe in detail your duties and responsibilities: _____

Number and kind of employees you supervised: _____

Your Supervisor: _____ May we contact? ___Yes ___No

Reason for Leaving: _____

Next Previous Employer:

Name of Employer: _____ From ___/___/___ To ___/___/___

Address: _____

Telephone Number: _____

Your Title: _____

Salary (Monthly or Hourly) _____
Beginning Ending

Describe in detail your duties and responsibilities: _____

Number and kind of employees you supervised: _____

Your Supervisor: _____ May we contact? ___Yes ___No

Reason for Leaving: _____

REFERENCES

List those that know of your abilities.

1. _____
Name Occupation Address City State Phone

2. _____
Name Occupation Address City State Phone

3. _____
Name Occupation Address City State Phone

1. Do you have a valid driver's license? YES NO

2. Do you have any relatives who work for the Town of Basin? YES NO

If so, who? _____

The facts made in my application are to the best of my knowledge, true and complete. I understand that any false statements or misrepresentations given by me on this application are sufficient cause for dismissal.

Signature Date

THE TOWN OF BASIN IS AN EQUAL OPPORTUNITY EMPLOYER

INTERVIEWED BY: _____ DATE: _____

COMMENTS: