



Quality Assurance Mission Statement: Through a Total Quality Concept, provide everyone who works, visits or participates in our facilities, parks and programs with a safe, enjoyable and fulfilling experience.

RECREATION COORDINATOR – HOURLY PART-TIME

DEADLINE FOR APPLYING: Thursday, October 26, 2023

To apply online: <https://www.governmentjobs.com/careers/norfun/> or submit to the Personnel Office located at the District's Administrative Center, 3825 Riverlakes Drive, Bakersfield, Ca., 93312, a **District Employment Application (resume's will be accepted only with a completed Application), current DMV printout, Questionnaire.** Current employees can submit an Employee Job Interest Form and Questionnaire. The application or Job Interest form can be downloaded from the District's website at www.norfun.org, Human Resource, Current Opportunities or request from the Personnel Office at 392-2000.

BASIC FUNCTION: Under direct supervision, oversees and/or coordinates an assigned program and/or activity at the District's Senior Adult Center. Programs include senior exercise programs, afternoon movies, senior marketplace and new recreation programming and special events at the senior adult center.

HOURLY RATE: \$16.50 per hour

HOURS: up to 19 hours per. Monday – Friday, between 11am to 5pm, varies depending on program and facility needs.

QUALIFICATIONS: The following represent the typical qualifications required for this position Minimum 21 years old; possess organization and leadership skills; and two years of experience in recreation or a related field. Experience in supervising, instructing, teaching customer service, and using a computer highly desired. Knowledge of developing, organizing, and coordinating the assigned program and/or activity. Ability to accommodate the program schedule; communicate effectively and provide direction, instruction, and/or teach staff and/or participants; establish, relate and maintain good working relationships with supervisor and co-workers; work in close communication with the supervisor; interact courteously with adult participants, families, and the public; and understand and follow written and/or oral instructions. May require driving for district purposes. If drive a personal vehicle for district purposes, mileage will be reimbursed at the current IRS rate. Must be able to relate to other people beyond giving and receiving instructions; can get along with co-workers or peers without exhibiting behavioral extremes; perform work activities requiring negotiating, instructing, supervising, persuading or speaking with others; and respond appropriately to correction and feedback from a supervisor.

PHYSICAL DEMANDS AND WORK ENVIRONMENT: Includes an indoor work environment at a senior adult facility. May require driving, assist with facility set-up, take-downs, and clean-up; and some lifting. Regularly required to communicate and receive and respond to complaints from staff, participants and the public. The qualification requirements listed above are representative of the knowledge, skill, and/or ability required to perform the essential functions of the job. Physical demands and work environment characteristics are representative of those an employee encounters while performing the essential functions of the job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

CONDITIONS OF EMPLOYMENT WITH THE DISTRICT: An offer of employment will be contingent upon passing the following:

- A background investigation will be conducted to include fingerprinting.
- Must submit to a post offer medical exam, functional capacity exam and drug screen.
- A valid California Class C driver's license and current Auto Insurance throughout employment and driving record must comply with District safety standards.
- Must submit verification of your identity and citizenship or legal right to work in the United States.

DUTIES AND RESPONSIBILITIES: Dependent upon the specific program, activity, and/or facility assigned to, the following represent the typical duties and responsibilities of this position. May not be assigned all duties listed, nor does this cover all duties which may be assigned.

ESSENTIAL JOB FUNCTIONS

- Works closely with supervisor in providing on-site supervision of an assigned program and meets regularly.
- In the absence of the supervisor, will direct the program staff, and/or participants.
- Reports on potential or actual performance issues to the Recreation Supervisor
- Coordinates, develops, and implements program related activities.
- Coordinates and/or assists with program activity set-ups, take-downs, and clean-up.
- Responsible for the security of the facility, and the use of the keys and alarm code to open and close the program facility.
- Insures employees and volunteers are professional toward participants, staff, supervisors, and the public.
- Provides information and assistance to participants and the public.
- Reports accidents and unsafe conditions as they occur.
- Must maintain the required safety training designated for this position.

OTHER JOB DUTIES

- Recommends new programs or modifications to programs and activities.
- Performs various clerical functions as assigned.
- Maintenance of master calendar as assigned.
- Assists in hiring qualified individuals, per District rules and regulations, as assigned.
- Assists in program related training for staff and participants as assigned.
- Assists in the evaluation of the work performance of program staff under their direction as assigned.
- Assists with participant surveys as assigned.
- Performs other related duties as assigned.

DISTRICT EXPECTATIONS OF THIS POSITION / QUALITY ASSURANCE:

- Consistently reports to work on time prepared to perform job duties.
- Prioritizes and performs duties as workload necessitates.
- Communicates regularly with supervisor about program issues.
- Provides outstanding customer service.
- Maintains respectful attitude.
- Interacts with customers and co-workers in a positive and courteous manner.
- Responsible for the efficient and effective delivery of services.

EQUAL OPPORTUNITY EMPLOYER

NORTH OF THE RIVER RECREATION AND PARK DISTRICT
3825 RIVERLAKES DRIVE, BAKERSFIELD, CA 93312 661-392-2000 www.norfun.org

SUPPLEMENTAL QUESTIONNAIRE

Recreation Coordinator - SAC

APPLICANT: _____ DATE: _____

GENERAL INFORMATION

The completion of this supplemental questionnaire is required for your application to be considered for this position and is an integral part of the examination process. It will be used to assess your experience as it relates to the position. Your responses will be evaluated and will assist in determining which applicants will receive further consideration in the examination process.

1. Describe your experience working with senior adults.
2. Describe your experience with developing and implementing new programs and activities for a specific group.
3. Describe your experience working with volunteers. Include information about the programs you utilized volunteers in and the number of volunteers you supervised.
4. Describe a successful partnership you have established, why the partnership was successful and what outcomes were achieved through this partnership.



PERSONNEL OFFICE
3825 Riverlakes Drive, Bakersfield, California 93312
Office (661) 392-2000 www.norfun.org

POSITION APPLYING FOR:

APPLICATION INSTRUCTIONS

1. Your further consideration for the position will depend upon the accurate information you provide on this application regarding your ability to meet or exceed the minimum requirements of the position. **This application must be filled out completely.** Incomplete or illegible applications will be rejected. Applications must be received in the Personnel Office no later than the date and time noted in the job announcement.
2. Notify the Personnel Office immediately if you have a change of address, phone, or employer.
3. You must submit any documents required with your application, (i.e.; typing certificate, DMV printout). Any material submitted during the application process becomes the property of NOR unless otherwise specified in the job announcement. Applicants who wish to retain copies must make their copies prior to submitting the materials.
4. **RESUMES may be added, but may not be substituted for completion of this application.**
5. Please complete the Applicant Data Record. Avoid any other reference to religion, race, nationality or any other legally protected status.
6. A separate application is required for each position.

01/2018

PERSONAL INFORMATION

NAME: _____

APPLICATION DATE: _____

ADDRESS: _____

Number Street

City

State

Zip Code

HOME PHONE: _____

BUSINESS/MESSAGE PHONE: _____

CELL PHONE: _____

E-MAIL: _____

The best number to reach you would be (check any that apply): Home____ Cell____ Business____ E-mail____

Are you currently employed? Y ☐ N ☐ May we contact your current employer? Y ☐ N ☐

HOW DID YOU HEAR ABOUT THIS JOB OPENING? ☐ Friend/Relative: _____ ☐ District Website ☐ Walk-in
☐ Other internet site ☐ Newspaper ☐ Other (please specify): _____

What date are you available to work: _____ Are you available to work Full-time ☐ Part-time ☐

What days and hours are you available to work?

Have you ever applied to, worked for, or volunteered with NOR? *If yes: state dates, positions and reason for leaving.* Y ☐ N ☐

(check all that apply) applied ☐ Worked ☐ Volunteer

List any different name(s) used:

Do you have any friends or relatives working for NOR? If yes, state name(s) and relationship: Y ☐ N ☐

If hired, would you have a reliable means of transportation to and from work? Y ☐ N ☐

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? *If no, describe the functions that cannot be performed.* Y ☐ N ☐

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

Are you at least 18 years old? (if under 18, if hired, you may be required to provide authorization to work) N/A ☐ Y ☐ N ☐

Are you legally eligible to be employed in the United States? (proof of identity and eligibility will be required upon employment) Y ☐ N ☐

Have you ever been convicted of any offense other than a minor traffic violation? (Misdemeanor convictions for marijuana-related offenses that are more than two years old need not be listed.) Y ☐ N ☐

If yes, state nature of the crime(s), when and where convicted, and disposition of the case. Describe either below, on a separate piece of paper, or complete the District's Conviction Review form and attach to this application.

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

AN EQUAL OPPORTUNITY EMPLOYER

All qualified applicants will receive consideration without regard to sex, marital status, race, age, creed, national origin, color, religion, mental or physical disability, veteran status, medical condition, sexual orientation or any other legally protected status.

EMPLOYMENT HISTORY (A Resume will not be a substitute for completing the information required in this section)

List all present and past employment for the **last 7 years starting with your most recent employer**. Include military service, volunteer activities, student period, or other special activities **and also include any periods of unemployment**. Incomplete information may exclude you from further consideration.

How many years experience have you had that would qualify you for this position, PAID: _____ UNPAID: _____

If any employment was under a different name, indicate name: _____

1. **Company Name:** _____ **Phone:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Type of Business: _____ **Supervisor:** _____ **Phone:** _____
Job Title: _____ **Start date:** _____ **End date:** _____ **FT** ☐ **PT** ☐ **Seasonal** ☐ **Volunteer** ☐
Work performed: _____

Reason for leaving: _____
May we contact this employer? **Y** ☐ **N** ☐ **Later** ☐

2. **Company Name:** _____ **Phone:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Type of Business: _____ **Supervisor:** _____ **Phone:** _____
Job Title: _____ **Start date:** _____ **End date:** _____ **FT** ☐ **PT** ☐ **Seasonal** ☐ **Volunteer** ☐
Work performed: _____

Reason for leaving: _____
May we contact this employer? **Y** ☐ **N** ☐ **Later** ☐

3. **Company Name:** _____ **Phone:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Type of Business: _____ **Supervisor:** _____ **Phone:** _____
Job Title: _____ **Start date:** _____ **End date:** _____ **FT** ☐ **PT** ☐ **Seasonal** ☐ **Volunteer** ☐
Work performed: _____

Reason for leaving: _____
May we contact this employer? **Y** ☐ **N** ☐ **Later** ☐

4. **Company Name:** _____ **Phone:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Type of Business: _____ **Supervisor:** _____ **Phone:** _____
Job Title: _____ **Start date:** _____ **End date:** _____ **FT** ☐ **PT** ☐ **Seasonal** ☐ **Volunteer** ☐
Work performed: _____

Reason for leaving: _____
May we contact this employer? **Y** ☐ **N** ☐ **Later** ☐

Explain any gaps in work history:

Have you ever been discharged or asked to resign from a job? If yes, explain: **Y** ☐ **N** ☐

For additional experience, use an additional sheet of paper with the above information or complete the Additional Work Experience form

EDUCATION, TRAINING, AND EXPERIENCE

High School-highest grade completed: _____ Graduated: Y ☐ N ☐ GED: Y ☐ N ☐ Name & location: _____

COLLEGES, UNIVERSITIES, BUSINESS OR TRADE SCHOOLS **LIST ALL APPLICABLE TO THIS POSITION.**

Name, Address, City, State, Zip	Course Of Study	# of yrs completed	Degree Or Diploma OR # of units completed

ADDITIONAL INFORMATION

Other training, skills or experience **RELATED** to the position applied for: (computers, office machines, typing speed, foreign languages, special courses, machinery, etc...)

Professional License, Certificates, or Memberships **RELATED** to position: (Title/Registration #/Expiration Date) *(per CA H&S Code 124235, Youth Sports Positions must complete Concussion Training and provide documentation prior to start date):*

Have any of the licenses or certificates listed above ever been revoked or suspended?

Y ☐ N ☐

If yes, state reason(s), date of revocation or suspension and date of reinstatement:

State any additional information you feel may be helpful:

REFERENCES *List three persons not related to you who have knowledge of your work performance.*

First Name: _____ Last Name: _____ Phone Number: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ No. of Years Acquainted: _____

First Name: _____ Last Name: _____ Phone Number: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ No. of Years Acquainted: _____

First Name: _____ Last Name: _____ Phone Number: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ No. of Years Acquainted: _____

PERSONNEL USE ONLY:

APPLICANT'S STATEMENT

Please read carefully and sign below

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the District. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the District, and that no promises or representations contrary to the foregoing are binding on the District unless made in writing and signed by me and the District's designated representative.

I understand, also, that I am required to abide by all rules and regulations of the District throughout my employment. In addition, I understand that a job offer would be contingent upon the following: I must submit proof of U.S. citizenship or legal right to remain and work in the United States and a criminal records check will be required through fingerprinting. I may be required to pass a physical examination and / or alcohol and drug screen.

APPLICANT SIGNATURE: _____ DATE: _____

North of the River Recreation and Park District may conduct reference and employment verifications prior to an offer of employment. Please sign the Disclosure Authorization and Release form below. It will be used when former employers request employee authorization prior to releasing employment information.



North of the River
recreation and park district

3825 Riverlakes Drive, Bakersfield, CA 93312 (661)392-2000 www.norfun.org

DISCLOSURE AUTHORIZATION AND RELEASE

RE: REFERENCE CHECK FOR EMPLOYMENT

TO WHOM IT MAY CONCERN:

I have applied for employment with North of the River Recreation and Park District. I hereby consent to the release of any and all information regarding my employment, job performance and any other pertinent information that you may have to any authorized employee, representative, or agent of North of the River Recreation and Park District. This information may be provided either verbally or in writing. This includes, but is not limited to, employment and education records and transcripts which you may possess, whether or not such records or information are confidential, privileged and/or of a derogatory nature.

In addition to authorizing the release of any information regarding my employment, I hereby direct you to release the requested information, records and/or transcripts upon request of the bearer. I understand that the information and records provided are for the official use of the District. I specifically and permanently waive any rights I may have to review or inspect any records, transcripts or information received during the course of the District's investigation.

I hereby release, hold harmless and indemnify you, as the custodian of any such records, my present and former employer(s), the District, and any educational institution which I may have attended, including all officers, agents, employees, representatives, or other personnel of any of those entities both individually and collectively, from any and all liability, damage, suits, actions or claims of whatever kind, that may directly or indirectly result from compliance with this authorization or any attempt to comply with it, by any person or party, whether such information is favorable or unfavorable to me.

A photocopy of this release form shall be as valid as the original. I acknowledge that I am entitled to a copy of this authorization and release of liability.

SIGNATURE: _____

DATE: _____



APPLICANT DATA RECORD

DATE: _____ POSITION APPLIED FOR: _____

AGE: _____ Male ☐ Female ☐

To further its commitment to Equal Employment Opportunity, the District requests that applicants voluntarily provide the following information. This data will be kept in a confidential file separate from the Application for Employment solely for research purposes only to help us comply with government record keeping, reporting and other legal requirements. All information will be used in accordance with the state and federal regulations. Your cooperation in providing this information is essential to the success of the research and evaluation program.

RECRUITMENT RESEARCH: We would appreciate information on how you heard about this job opportunity in order to help us determine what the most effective recruitment source is. Please check one or more.

- | | |
|--|--|
| <input type="checkbox"/> Walk-in | <input type="checkbox"/> School |
| <input type="checkbox"/> NOR Website (norfun.org) | <input type="checkbox"/> Other (specify) |
| <input type="checkbox"/> Other internet site (specify) | |
| <input type="checkbox"/> Newspaper (specify) | |
| <input type="checkbox"/> Friend/relative (name) | |
| <input type="checkbox"/> Employment Agency | |

EDUCATION: (Please check the highest level achieved):

- ☐ Not a HS Graduate
☐ HS Diploma/GED
☐ Some College

☐ College Degree: _____

ETHNIC ORIGIN: (Please check one)

- | | |
|---|---|
| <input type="checkbox"/> White / Caucasian | <input type="checkbox"/> American Indian / Alaskan Native |
| <input type="checkbox"/> Black / African/American | <input type="checkbox"/> Asian / Pacific Islander |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Filipino | |

APPLICANT NAME: _____
APPLICATION DATE: _____

ADDITIONAL WORK EXPERIENCE

5. **Company Name:** _____ **Phone:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Type of Business: _____ **Supervisor:** _____ **Phone:** _____
Job Title: _____ **Start date:** _____ **End date:** _____ **FT** ☐ **PT** ☐ **Seasonal** ☐ **Volunteer** ☐
Work performed: _____

Reason for leaving: _____

May we contact this employer? **Y** ☐ **N** ☐ **Later** ☐
6. **Company Name:** _____ **Phone:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Type of Business: _____ **Supervisor:** _____ **Phone:** _____
Job Title: _____ **Start date:** _____ **End date:** _____ **FT** ☐ **PT** ☐ **Seasonal** ☐ **Volunteer** ☐
Work performed: _____

Reason for leaving: _____

May we contact this employer? **Y** ☐ **N** ☐ **Later** ☐
7. **Company Name:** _____ **Phone:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Type of Business: _____ **Supervisor:** _____ **Phone:** _____
Job Title: _____ **Start date:** _____ **End date:** _____ **FT** ☐ **PT** ☐ **Seasonal** ☐ **Volunteer** ☐
Work performed: _____

Reason for leaving: _____

May we contact this employer? **Y** ☐ **N** ☐ **Later** ☐
8. **Company Name:** _____ **Phone:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Type of Business: _____ **Supervisor:** _____ **Phone:** _____
Job Title: _____ **Start date:** _____ **End date:** _____ **FT** ☐ **PT** ☐ **Seasonal** ☐ **Volunteer** ☐
Work performed: _____

Reason for leaving: _____

May we contact this employer? **Y** ☐ **N** ☐ **Later** ☐

Explain any gaps in work history:

Additional Information: