



City Of Greencastle Job Description

Job Title: Assistant Aquatics Director
Department: Parks and Recreation
Reports To: Assistant Parks Director/Aquatics Director
FLSA Status: Nonexempt
Last HR Review: November 2019

Principal Function: The Assistant Aquatics Director is responsible to assist the Assistant Parks Director/Aquatics Director in overseeing the efficient operation of the Greencastle Aquatics Center, Bob York Memorial Splash Park and Greencastle Parks & Recreation Department programs, to include: development, planning, coordination, and evaluation of year-around recreational, cultural, social, fitness programs, seasonal aquatic programs and the maintenance of facilities and grounds that reflect the interests and leisure needs of all age groups within the community and surrounding areas.

Essential Duties and Responsibilities: Duties include, but are not limited to:

- Assists the Assistant Parks Director/Aquatics Director with management of the aquatics center, staff management, facility maintenance, water quality, water safety, admissions, concessions operations, surrounding public grounds and parking lots
- Assists the Assistant Parks Director/Aquatics Director with administration of the aquatic center's programs, pool rentals and special events
- Assists the Assistant Parks Director/Aquatics Director with scheduling, developing and leading staff in-service training to include: assisting with training agendas, recording staff attendance and maintaining information reviewed during trainings.
- Assists the Assistant Parks Director/Aquatics Director with planning and assigning work duties.
- Completes the necessary facility reports, accident and incident reports, operational logs, daily cash reports, and other paperwork as assigned
- Ensures every aspect of the aquatics center's operation is safe by checking the center's equipment, filter and recirculation systems and maintaining proper chemical levels
- Develops and enforces the Emergency Action System (EAS) for the aquatic center, addressing various program activities conducted throughout the day and evening
- Ensures the pool is sufficiently staffed at all times and evaluates existing situations and utilizes good judgement in making decisions concerning patrons and staff.
- Reports to work prior to scheduled time in full uniform.
- Acts as back-up for the Head Lifeguard, Lifeguard, Front Desk Cashier, Concession Manager, Concessionaires, and pool maintenance, as needed.
- Completes other duties as assigned and maintains an effective communication process with the Assistant Parks Director/Aquatics Director.

Supervisory Responsibilities: In the absence of the Assistant Parks Director/Aquatics Director, supervises the Head Lifeguard, Lifeguard, Front Desk Cashiers, Pool Maintenance, Concession Manager, and concession workers. Employee carries out supervisory responsibilities in accordance with the organization's policies and applicable laws. Responsibilities include interviewing, hiring, and training employees; planning, assigning, and directing work; scheduling and approving time worked; evaluating performance; rewarding and disciplining employees; addressing complaints and resolving problems.

Qualifications: To perform this job successfully, an individual must be able to perform each essential duty according to the requirements of the organization. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be



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made to enable individuals with disabilities to perform the essential duties and responsibilities.

City-Related Competencies: To perform this job successfully, all employees working in the City should demonstrate the following competencies:

- **Resident Service** – Manages difficult or emotional resident situations; responds promptly to resident needs; solicits resident feedback to improve service; responds to requests for service and assistance; meets commitments.
- **Organizational Support** – Follows policies and procedures; completes administrative tasks correctly and on time; supports the City's goals and values; benefits the City through outside activities; supports affirmative action and respects diversity.
- **Professionalism** – Approaches others in a tactful manner; reacts well under pressure; treats others with respect and consideration regardless of their status or position; accepts responsibility for personal actions and works ethically and with integrity; follows through on commitments.
- **Quality and Quantity** – Demonstrates accuracy and thoroughness; looks for ways to improve and promote quality; applies feedback to improve performance; monitors own work to ensure quality; meets productivity standards; completes work in timely manner; strives to increase productivity; works quickly but efficiently.
- **Dependability** – Follows instructions; responds to management direction; takes responsibility for own actions; keeps commitments; commits to long hours of work when necessary to reach goals; completes tasks on time or notifies appropriate person with an alternate plan.

Job-Related Competencies: To perform this job successfully, employees in this job should demonstrate the following competencies:

- **Problem Solving** – Identifies and resolves problems in a timely manner; gathers and analyzes information skillfully; develops alternative solutions; works well in group problem solving situations; uses reason even when dealing with emotional topics.
- **Oral and Written Communication** – Speaks clearly and persuasively in positive or negative situations; listens to others without interrupting; keeps emotions under control; writes clearly and informatively; edits work for spelling and grammar; varies writing style to meet needs; presents numerical data effectively; able to read and interpret written information.
- **Safety and Security** – Observes safety and security procedures; determines appropriate action beyond guidelines; reports potentially unsafe conditions; uses equipment and materials properly.
- **Adaptability** – Adapts to changes in the work environment; manages competing demands; changes approach or method to best fit the situation; able to deal with frequent change, delays or unexpected events.

Education and/or Experience: High school diploma or general education degree (GED) is desired. Must be 18 years of age and have a valid Indiana Operator's License. Experience in an aquatics or recreation setting is desired. American Red Cross First-Aid and Cardiopulmonary Resuscitation (CPR), and Lifeguard certifications are required. Water Safety Instructor (WSI) and Lifeguard Instructor (LGI) certifications are desired. Ability to be bonded is required.

Other Skills and Abilities: The following skills and abilities are either required or desired.

- Computer software skills to include: Microsoft Outlook, Word, Excel, PowerPoint, and Executive Time are required.
- A comprehensive knowledge of mechanical equipment and maintenance procedures and practices of pool operations is required.
- A working knowledge of preventive maintenance of pool equipment is required.
- The ability to communicate effectively orally by telephone or in person, and in writing is



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required.

- The ability to plan and prioritize work projects is required.
- The ability to analyze maintenance problems and determine an appropriate solution is required.
- A working ability to read and interpret technical manuals and blueprints and to determine solutions to a variety of maintenance and repair problems is required.
- The ability to operate various pool and park maintenance equipment and tools such as push lawnmowers, automated pool vacuum, and power washer is required.
- The ability to remain current with all required licenses, certifications and in-service requirements is required.
- The ability to operate a computer, printer, copy machine, scanner, fax machine, and other office equipment is desired.
- The ability to speak, read and write in English is required. Spanish is desired.
- The ability to travel in order to attend conferences, seminars, and training is required.

Physical Demands: The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential duties and responsibilities.

While performing the duties of this job, the employee is regularly required to stand; walk; use hands to finger, handle, or feel; reach with hands and arms; and talk or hear. The employee is frequently required to sit; climb or balance; and stoop, kneel, crouch, or crawl. The employee is occasionally required to taste or smell; and lift and/or move up to 50 pounds.

Specific vision abilities required by this job include close vision (clear vision at 20 inches or less), distance vision (clear vision at 20 feet or more), peripheral vision (ability to observe an area that can be seen up and down or to the left and right while eyes are fixed on a given point), depth perception (three-dimensional vision, ability to judge distances and spatial relationships), and the ability to adjust focus (ability to adjust the eye to bring an object into sharp focus).

Work Environment: The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential duties and responsibilities.

While performing the duties of this job, the employee is regularly exposed to outdoor weather conditions. The employee is occasionally exposed to wet or humid conditions (non-weather); working near moving mechanical parts; working in high, precarious places; fumes or airborne particles; toxic or caustic chemicals; the risk of electrical shock; and vibration. The noise level in the work environment is usually moderate to loud.

Personal protective equipment must be worn when required to include: closed toed shoes, work boots, hard hat, ventilation mask, safety goggles, gloves, hearing protection, and protective clothing.

While the Parks and Recreation Department office of the City of Greencastle is usually open from 8:00 a.m. to 5:00 p.m., Monday through Friday. This position may require working beyond these hours into the evenings and on the weekends and holidays. It requires the ability to drive a City-owned vehicle; thus, a valid driver's license is required.



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SIGNATURES:

Incumbent's Signature

Incumbent's Printed Name

Date

Parks and Recreation Director's Signature

Parks and Recreation Director's Printed Name

Date

CITY OF GREENCASTLE
EMPLOYMENT APPLICATION
AN EQUAL OPPORTUNITY EMPLOYER

It is our policy to comply fully with all federal, state and local equal employment opportunity laws. This organization provides equal employment and advancement opportunities for all persons regardless of race, creed, sex, national origin, age, religion, disability, marital status, sexual orientation or any other classification protected by law.

Employees of this organization are selected in order to accomplish the legal and operational duties established by statute and by the policy choices of the organization's elected officials. Each employee is expected to conduct him/herself in a manner that reflects favorably upon the organization and to recognize that he/she is subject to additional public scrutiny in his/her public and personal lives.

PLEASE PRINT IN BLUE OR BLACK INK

NAME (AS IT APPEARS ON SOCIAL SECURITY / WORK PERMIT CARD):	FIRST	MI	LAST
ADDRESS:			
CITY, STATE, ZIP:			
HOME TELEPHONE:			
CELL PHONE:			
E-MAIL:			
ARE YOU AT LEAST 18 YEARS OLD?			
OTHER NAMES YOU HAVE USED:			
POSITION APPLIED FOR:			
SALARY REQUIREMENTS:			
REFERRED FOR THIS POSITION BY:			
DATE AVAILABLE:			
HAVE YOU EVER BEEN EMPLOYED BY THIS ORGANIZATION?			
IF YES, DATES EMPLOYED, DEPARTMENT, SUPERVISOR AND REASON FOR LEAVING:			
HAVE YOU EVER BEEN CONVICTED OF A CRIME? (DO NOT INCLUDE ANY CONVICTIONS THAT HAVE BEEN EXPUNGED)			
IF YES, GIVE LOCATION, DATE, CHARGE AND DISPOSITION OF CASE(S) ON A SEPARATE PAGE:			

U.S. MILITARY SERVICE

IF YOU HAVE SERVED IN THE U.S. MILITARY, PLEASE PROVIDE THE FOLLOWING INFORMATION:

BRANCH OF SERVICE:

DATES SERVED: FROM: TO:

TYPE OF DISCHARGE:

EDUCATION / SKILLS

EDUCATIONAL LEVEL

HIGH SCHOOL

NAME	CITY	STATE	YRS COMPLETED
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COMMUNITY COLLEGE

NAME	CITY	STATE	DEGREE	MAJOR	YRS COMPLETED
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BUSINESS OR TRADE SCHOOL

NAME	CITY	STATE	DEGREE	MAJOR	YRS COMPLETED
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COLLEGE OR UNIVERSITY

NAME	CITY	STATE	DEGREE	MAJOR	YRS COMPLETED
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GRADUATE SCHOOL

NAME	CITY	STATE	DEGREE	MAJOR	YRS COMPLETED
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COMPUTER SOFTWARE SKILLS

COMPUTER SOFTWARE	NAME OF SOFTWARE	YOUR PROFICIENCY WITH THE SOFTWARE		
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WORD PROCESSING		SKILLED	COMPETENT	FAMILIAR
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SPREADSHEET		SKILLED	COMPETENT	FAMILIAR
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DATABASE		SKILLED	COMPETENT	FAMILIAR
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OTHER		SKILLED	COMPETENT	FAMILIAR
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LICENSES / CERTIFICATIONS / ORGANIZATIONS

PROFESSIONAL LICENSES AND CERTIFICATIONS (JOB RELATED)	TYPES OF LICENSES AND CERTIFICATIONS	DATE ISSUED	REGISTRATION NUMBER	STATE	EXPIRES MO / YR
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PROFESSIONAL, SCHOLASTIC AND OTHER ORGANIZATIONS (JOB RELATED) EXCLUDE MEMBERSHIPS THAT INDICATE YOUR RACE, RELIGION, COLOR, ANCESTRY, SEX, AGE, DISABILITY OR VETERAN STATUS	NAME	DATES

JOB RELATED TRAINING

NAME OF COURSE	YEAR COMPLETED	SKILLS DERIVED FROM COURSE

EMPLOYMENT HISTORY: BEGINNING WITH YOUR CURRENT OR MOST RECENT JOB, LIST YOUR WORK HISTORY FOR THE PAST TEN YEARS. INCLUDE PART-TIME, SEASONAL, TEMPORARY AND ALL PERIODS OF UNEMPLOYMENT. FOR DATES EMPLOYED USE THE FORMAT MM/YY.
 BASE SALARY DOES NOT INCLUDE OVERTIME, BONUSES OR COMMISSIONS.

DATES WORKED FROM AND TO:
FINAL SALARY/WAGE:
NAME AND ADDRESS OF EMPLOYER:
EMPLOYER'S PHONE NUMBER:
JOB POSITON OR TITLE:
DESCRIPTION OF DUTIES:
NAME OF SUPERVISOR AND PHONE NUMBER:
NAME OF 1 OR 2 CO-WORKERS AND PHONE NUMBERS IF KNOWN:
REASON FOR LEAVING:
BASE SALARY: MONTHLY WEEKLY HOURLY
OTHER COMPENSATIONS OR BONUSES:

DATES WORKED FROM AND TO:
FINAL SALARY/WAGE:
NAME AND ADDRESS OF EMPLOYER:
EMPLOYER'S PHONE NUMBER:
JOB POSITON OR TITLE:
DESCRIPTION OF DUTIES:
NAME OF SUPERVISOR AND PHONE NUMBER:
NAME OF 1 OR 2 CO-WORKERS AND PHONE NUMBERS IF KNOWN:
REASON FOR LEAVING:
BASE SALARY: MONTHLY WEEKLY HOURLY
OTHER COMPENSATIONS OR BONUSES:

DATES WORKED FROM AND TO:
FINAL SALARY/WAGE:
NAME AND ADDRESS OF EMPLOYER:
EMPLOYER'S PHONE NUMBER:
JOB POSITON OR TITLE:
DESCRIPTION OF DUTIES:
NAME OF SUPERVISOR AND PHONE NUMBER:
NAME OF 1 OR 2 CO-WORKERS AND PHONE NUMBERS IF KNOWN:
REASON FOR LEAVING:
BASE SALARY: MONTHLY WEEKLY HOURLY
OTHER COMPENSATIONS OR BONUSES:

NOTICE: STOP

PLEASE MAKE SURE YOU HAVE MADE AS MANY ADDITIONAL COPIES OF THE FOLLOWING PAGE AS YOU WILL NEED TO LIST ALL OF YOUR JOBS. DO NOT CONTINUE UNLESS YOU ARE SURE YOU HAVE ENOUGH COPIES.

(THIS PAGE IS TO BE COPIED FOR RECORDING ADDITIONAL EMPLOYMENT INFORMATION)

DATES WORKED FROM AND TO:			
FINAL SALARY/WAGE:			
NAME AND ADDRESS OF EMPLOYER:			
EMPLOYER'S PHONE NUMBER:			
JOB POSITION OR TITLE:			
DESCRIPTION OF DUTIES:			
NAME OF SUPERVISOR AND PHONE NUMBER:			
NAME OF 1 OR 2 CO-WORKERS AND PHONE NUMBERS IF KNOWN:			
REASON FOR LEAVING:			
BASE SALARY:	MONTHLY	WEEKLY	HOURLY
OTHER COMPENSATIONS OR BONUSES:			

DATES WORKED FROM AND TO:			
FINAL SALARY/WAGE:			
NAME AND ADDRESS OF EMPLOYER:			
EMPLOYER'S PHONE NUMBER:			
JOB POSITION OR TITLE:			
DESCRIPTION OF DUTIES:			
NAME OF SUPERVISOR AND PHONE NUMBER:			
NAME OF 1 OR 2 CO-WORKERS AND PHONE NUMBERS IF KNOWN:			
REASON FOR LEAVING:			
BASE SALARY:	MONTHLY	WEEKLY	HOURLY
OTHER COMPENSATIONS OR BONUSES:			

DATES WORKED FROM AND TO:			
FINAL SALARY/WAGE:			
NAME AND ADDRESS OF EMPLOYER:			
EMPLOYER'S PHONE NUMBER:			
JOB POSITION OR TITLE:			
DESCRIPTION OF DUTIES:			
NAME OF SUPERVISOR AND PHONE NUMBER:			
NAME OF 1 OR 2 CO-WORKERS AND PHONE NUMBERS IF KNOWN:			
REASON FOR LEAVING:			
BASE SALARY:	MONTHLY	WEEKLY	HOURLY
OTHER COMPENSATIONS OR BONUSES:			

EXPLANATION OF INTERRUPTIONS IN EMPLOYMENT HISTORY

PLEASE USE THIS SPACE TO EXPLAIN EMPLOYMENT HISTORY INTERRUPTIONS SINCE HIGH SCHOOL THAT DO NOT PERTAIN TO PREGNANCY, CHILD CARE, DISABILITY OR ANY OTHER PROTECTED ACTIVITY.

REFERENCES

DO NOT INCLUDE RELATIVES, FORMER EMPLOYERS, OR PERSONS LIVING OUTSIDE THE UNITED STATES.
LIST ONLY REFERENCES WHO HAS A DEFINITE KNOWLEDGE IF YOUR QUALIFICATIONS AND FIT FOR
THE POSITION FOR WHICH YOU ARE APPLYING. DO NOT REPEAT THE NAMES OF SUPERVISORS LISTED
IN THE EMPLOYMENT SECTION OF THIS APPLICATION.

Name	Years Known	Address	Phone

EMERGENCY CONTACT

NAME:	
RELATIONSHIP:	
ADDRESS:	
HOME PHONE:	
CITY, STATE, ZIP:	
BUSINESS PHONE:	

AUTHORIZATION AND AGREEMENT

I hereby authorize the employer, its representatives, employees or agents to conduct all pre-employment inquiries and tests as described. I further authorize the employer and its agents to verify all statements contained in this application and any other materials I submit in connection with my employment application. I agree to complete any requisite authorizations forms. I release the employer, its agents and all providers of information from any liability arising out of the gathering and use of such information. In the event of employment, this authorization and release is valid throughout my employment and a photocopy is as effective as the original.

I understand all offers of employment are conditional upon satisfactory reference checks, successful completion of all pre-employment tests and production of all documents necessary for the employer to verify my identity and work authorization in accordance with the requirements of the Immigration and Naturalization Services.

As an employer, this organization is subject to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. Applicants who believe they are covered by these Acts are invited to identify their disabilities and special accommodations they feel are necessary to adequately perform their jobs. Submission of this information is strictly voluntary and may be made known to the Human Resource Manager.

I certify the information provided in the application is true and complete to the best of my knowledge. I understand withholding pertinent information or submitting false or misleading information on this application, my resume, during interviews or at any other time during the hiring process constitutes valid grounds for disqualification from further consideration for hire or immediate dismissal from employment and loss of all employee benefits and privileges. I further understand and agree that the employer shall not be liable in any respect if my employment is so denied or terminated.

I understand and agree that if I am applying for a law enforcement position, I will be required to comply with all requirements of the Peace Officer Standards and Training Board (or equivalent agency) required by the state. I further understand that any offer of employment is conditioned upon completing all those tests, including physical agility, to determine my fitness for this position.

I understand that acceptance of this application by the employer neither expresses nor implies I will be offered employment. I understand my employment is at will and I may resign at any time for any reason; similarly, my employment may be terminated by the organization at any time for any reason. Any changes to this at-will employment agreement will not be valid unless in writing signed by me and a duly authorized representative of this employing organization.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE AUTHORIZATION AND AGREEMENT STATEMENTS

SIGNATURE OF APPLICANT _____ DATE _____