



City Of Greencastle Job Description

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

Principal Function: The Concession Stand Manager is responsible for overseeing the operations of the Aquatics Center and Softball concession stands to include the preparation and serving of food products in accordance to established policies and health codes.

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

1. Completes all duties of the Concessionaire.
2. Inspects and ensures cleanliness of concession stands per State of Indiana health regulations.
3. Ensures availability of staffing and coordinates scheduling for employees.
4. Trains employees on the appropriate use of concession equipment and enforces service standards.
5. Analyzes and resolves problems with personnel, guests, and the operations of the concession stands.
6. Cashes out the drawer with the cashier in accordance with cash handling procedures. Investigates overages and shortages with employees and the Parks and Recreation Director.
7. Keeps inventory current and supplied by estimating predicted usage. Orders supplies as needed.
8. Inspects and ensures accuracy of all deliveries and rotates stock so oldest is used first.
9. Serves as a goodwill ambassador to the public by responding to citizen's concerns by answering and providing information and assistance.
10. Reports to work prior to scheduled time in appropriate uniform.
11. Prepares and maintains accurate records as requested by the Assistant Parks Director/Aquatics Director.
12. Completes other duties as assigned and maintains an effective communication process with the Assistant Parks Director/Aquatics Director.

Supervisory Responsibilities: Supervises the Concessionaires. 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 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



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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); or one to two-years related experience and/or training; or equivalent combination of education and experience. ServSafe Training Certification is required. First Aid and Cardiopulmonary Resuscitation (CPR) certification is required within six-months of employment. Previous supervisory experience is desired.

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.
- The ability to abide by and cooperate fully in the implementation of and compliance with the City of Greencastle's system of internal controls pursuant to IC 5-11-1-27 is required.
- The ability to use excellent verbal and written communication skills is required.
- The ability to multi-task and work in a fast-paced environment while providing exceptional customer service is required.
- The ability to utilize analytical thinking, problem-solving skills, and decision-making skills is required.
- The ability to provide leadership and maintain authority is required.
- The ability to adapt and conform to shifting priorities and demands and execute accordingly.
- The ability to read inventory and menus is required.
- The ability to utilize safety standards when working with hot grease is required.



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- The ability to attend meetings and seminars 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.

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; taste or smell; and talk or hear. The employee is frequently required to sit; climb or balance; stoop, kneel, crouch, or crawl; and lift and/or move at least 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, 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 work beyond these hours and on the weekends and holidays. It may require the ability to drive a City-owned vehicle. Thus, a valid driver's license is required.

SIGNATURES:

Incumbent's Signature

Incumbent's Printed Name

Date



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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		

COMMUNITY COLLEGE

	NAME	CITY	STATE	DEGREE	MAJOR	YRS COMPLETED

BUSINESS OR TRADE SCHOOL

	NAME	CITY	STATE	DEGREE	MAJOR	YRS COMPLETED

COLLEGE OR UNIVERSITY

	NAME	CITY	STATE	DEGREE	MAJOR	YRS COMPLETED

GRADUATE SCHOOL

	NAME	CITY	STATE	DEGREE	MAJOR	YRS COMPLETED

COMPUTER SOFTWARE SKILLS

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

LICENSES / CERTIFICATIONS / ORGANIZATIONS

PROFESSIONAL LICENSES AND CERTIFICATIONS (JOB RELATED)	TYPES OF LICENSES AND CERTIFICATIONS	DATE ISSUED	REGISTRATION NUMBER	STATE	EXPIRES MO / YR

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 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:

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:			
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JOB POSITION OR TITLE:			
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NAME OF 1 OR 2 CO-WORKERS AND PHONE NUMBERS IF KNOWN:			
REASON FOR LEAVING:			
BASE SALARY:	MONTHLY	WEEKLY	HOURLY
OTHER COMPENSATIONS OR BONUSES:			

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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.

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 _____