

City of Muscle Shoals

2010 Avalon Avenue • Muscle Shoals, Alabama 35661
Post Office Box 2624 • Muscle Shoals, Alabama 35662-2624
(256) 383-5675 • Fax: (256) 386-9201 • www.cityofmuscleshoals.com

Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Instructions: Complete all information. Please complete insert if enclosed. Be sure to sign and date the application. MUST use ink on this application.

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

Last Name		First Name		Middle Name	
Address	Street	City	State	Zip Code	
Telephone Number(s)			Social Security Number (Optional)		
E-Mail Address					

POSITION APPLYING FOR: _____

May we contact your present employer? Yes No

Have you filed an application or been employed here before? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? (Proof of citizenship or immigration status will be required upon employment.) Yes No

Are you available to work? Full time Part time On Shifts

Are any of your relatives employed with the City of Muscle Shoals? Yes No

If yes, list name(s) _____

Have you been convicted of a felony? Yes No

If yes, please explain _____

Have you ever been convicted or arrested for any reason other than a minor traffic violation? Yes No

Are you on lay-off and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Education

	Name of School	City and State	Year Graduated	Course of Study	Course or Degree
High School					
College					
College					
Vocational					
Other (Specify)					

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Give name, address and phone number of three references not related to you.	
Name	Address and Phone Numbers

Employment Experience

THIS SECTION MUST BE COMPLETED EVEN WITH RESUME ATTACHED.

List each job held. Start with your present or last job. Include military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disability, or other protected status.

1	Current or Last Employer	Dates Employed		Work Performed
	Telephone Number(s)	From	To	
	Job Title	Salary (Optional)		
	Supervisor (Include first and last name)			
	Reason for Leaving			
2	Previous Employer	Dates Employed		Work Performed
	Telephone Number(s)	From	To	
	Job Title	Salary (Optional)		
	Supervisor (Include first and last name)			
	Reason for Leaving			
3	Previous Employer	Dates Employed		Work Performed
	Telephone Number(s)	From	To	
	Job Title	Salary (Optional)		
	Supervisor (Include first and last name)			
	Reason for Leaving			
4	Previous Employer	Dates Employed		Work Performed
	Telephone Number(s)	From	To	
	Job Title	Salary (Optional)		
	Supervisor (Include first and last name)			
	Reason for Leaving			

Agreement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize you to make such investigations and inquiries of all statements contained in this application as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the City of Muscle Shoals.

Signature of Applicant

Date

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

FOR HUMAN RESOURCE DEPARTMENT USE ONLY - DO NOT WRITE BELOW

Initial

Complete <input type="checkbox"/>							
Incomplete <input type="checkbox"/>							

Scheduled Agility Test Date: _____ Time: _____

Scheduled Interview Date: _____ Time: _____

Additional Interview Date: _____ Time: _____

Notes: _____

Employed Yes No

Date of Employment _____

**QUESTIONNAIRE FOR APPLICANTS FOR
GOLF COURSE MAINTENANCE SUPERINTENDENT
CYPRESS LAKES GOLF AND TENNIS FACILITY**

PLEASE RETURN WITH YOUR APPLICATION.

PLEASE COMPLETE BOTH PAGES OF QUESTIONNAIRE.

1. Do you understand that any offer of employment is conditional upon a physician's certification of your fitness for duty based upon job-related criteria?

Yes _____ No _____

2. Do you understand that any offer of employment is conditional upon a successful completion of controlled substance testing?

Yes _____ No _____

3. **A VALID DRIVER LICENSE IS REQUIRED.**
Do you meet this requirement?

Yes _____ No _____

PLEASE INCLUDE DRIVER LICENSE NUMBER AND EXPIRATION DATE IN THE SPACES BELOW:

DRIVER LICENSE NUMBER _____

EXPIRATION DATE _____

4. **MUST POSSESS A HIGH SCHOOL DIPLOMA OR ITS EQUIVALENCY.**
Do you meet this requirement?

Yes _____ No _____

**PLEASE ATTACH COPY OF YOUR DIPLOMA OR CERTIFICATE WITH APPLICATION.
(COLLEGE DIPLOMA WILL BE ACCEPTED IF HIGH SCHOOL NOT AVAILABLE.)
(HIGH SCHOOL OR COLLEGE TRANSCRIPT WILL ALSO BE ACCEPTED.)**

5. **MUST POSSESS AT MINIMUM CLASS "B" membership in the Golf Course Superintendent Association of America (GCSAA), or be able to obtain this membership classification within thirty (30) days of hire date.**
Do you meet this requirement?

Yes _____ No _____

PLEASE ATTACH PROOF OF MEMBERSHIP.

6. **MUST POSSESS A CURRENT COMMERCIAL PESTICIDE APPLICATIONS CERTIFICATE.**
Do you meet this requirement?

Yes _____ No _____

PLEASE ATTACH COPY OF YOUR CERTIFICATE.

7. **Must have a minimum of three to five years of paid working experience at an eighteen hole golf facility within the golf maintenance operation as the superintendent or first assistant actively involved in staffing, payroll, daily assignments, etc.**
Do you meet this requirement?

Yes _____ No _____

8. **Are any members of your or your spouse's immediate family (defined by Paragraph #1.2.1 of the Civil Service Board's Personnel Policies and Procedures as spouse, parent, child, brother, sister, grandparent, grandchild, aunt, uncle, nephew, niece) employed in the department for which you desire consideration?**

Yes _____ No _____

9. **DO YOU UNDERSTAND THAT YOU MUST COMPLETE ALL INFORMATION ON YOUR APPLICATION OR IT WILL NOT BE CONSIDERED?**

Yes _____ No _____

I certify that answers given herein are true and correct to the best of my ability. I also understand that in the event I am employed, that false or misleading information given on this form may result in my discharge.

SIGNATURE

DATE

BACKGROUND REPORT DISCLOSURE STATEMENT

Please read the information on this form carefully. It describes your rights as a consumer.

City of Muscle Shoals uses Risk Mitigation Services, Inc. to conduct background investigations as part of its employment process. Such background investigations are covered by Section 603 of the federal Fair Credit Reporting Act (FCRA) and are termed "consumer reports" and/or "investigative consumer reports". Risk Mitigation Services, Inc. is a "Consumer Reporting Agency" (CRA) covered by the FCRA. City of Muscle Shoals uses the background reports provided by Risk Mitigation Services, Inc. for employment, continued employment, volunteer status, or promotion purposes. City of Muscle Shoals will procure the report from:

Risk Mitigation Services, Inc.,
PO Box 2129
Muscle Shoals, AL 35662
Tel. 866-383-1180
www.riskmitigation.us

Under Section 603 of the FCRA, a consumer report or consumer investigative report is an independent investigation of your background, which may include information regarding your "character, general reputation, personal characteristics, or mode of living." The background report that Risk Mitigation Services, Inc. provides may contain information about your driving record, civil and criminal legal and court records, criminal conviction records, education, professional or employment-related credentials, credit history, identity, locations and addresses where you have lived, Social Security number, education history, previous employment, and other public records.

The FCRA requires that if City of Muscle Shoals denies you employment, continued employment, volunteer status, or promotion as a result of information contained in a background report, you must be provided with a copy of the report, a summary of your rights under the FCRA, the name, address, and telephone number of the consumer reporting agency that furnished the report and given a reasonable opportunity to respond to disputed information contained in the report.

I hereby consent to your obtaining the above information from Risk Mitigation Services, Inc.

First Name (please print)	Middle Name	Last name
Signature		Date

Social Security Number: _____ *Date of Birth: _____

Driver's License Number: _____ DL State: _____

Daytime Telephone Number: _____

International Applicants

International Government ID: _____
ID# *Country of Origin*

International Address: _____
Physical Address

City/Province/Country

*Without this information, we will be unable to properly identify you in the event we find adverse information during the course of the background check.

IMPORTANT – PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION
ACKNOWLEDGMENT AND AUTHORIZATION

USA Applicants Only: I acknowledge receipt of the BACKGROUND CHECK DISCLOSURE STATEMENT and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents.

Applicants with Personal Data from Outside the USA Only: I acknowledge receipt of the DATA PRIVACY NOTICE and certify that I have read and understand the document.

I hereby freely authorize release to City of Muscle Shoals of consumer reports and/or investigative consumer reports as part of its evaluation of my application for employment, continued employment, or promotion. I also authorize disclosure to City of Muscle Shoals and/or to Risk Mitigation Services, Inc. or its agents information that City of Muscle Shoals deems pertinent to its consideration of my application for employment, continued employment, or promotion, including but not limited to my employment history, earning history, education (transcripts), motor vehicle driving licensure and record, criminal history, credit history, public records, records of administrative adjudications, by any individual, corporation or other private or public entity, including without limitation the following: employers; learning institutions, including colleges and universities; law enforcement agencies; federal, state and local courts; the military; motor vehicle records agencies; credit bureaus, and other applicable sources. These reports may contain information regarding your use of social media, the content that you contribute to social media, and any other publicly-available information about you on the internet. Social media include, but are not limited to, social networking websites (e.g., Facebook, MySpace), professional networking websites (e.g., LinkedIn), video-sharing websites (e.g., YouTube), image-sharing websites (e.g., Flickr), blogs, wikis, virtual worlds, and personal websites.

In accordance with the host nation's laws and the laws applicable to me depending on my location regarding the release of information, I authorize the release and transmittal of information from any country to the above listed parties, their clients, and/or their agents or vendors located in any country, including countries outside the European Union that may have a different level of data protection or inadequate data protection laws as defined by the European Commission.

I understand this authorization will apply throughout my employment status to the extent permitted by law, unless revoked or canceled by sending a signed revocation letter or statement to City of Muscle Shoals. I understand to the extent allowed by law, information contained in my job application or that I have otherwise disclosed before, during, or after my employment, if any, may be used to obtain consumer reports and/or investigative consumer reports.

I understand that providing false information or omitting material information on my employment application materials or as part of the employment process is grounds for rejecting employment, or terminating employment, whenever discovered.

This Authorization form, in original, faxed, photocopied, or electronic form, will be valid for any reports that City of Muscle Shoals may request. The following is my true and complete legal name and all information is true and correct to the best of my knowledge.

New York Applicants Only: Upon request, you will be informed whether or not a consumer report was requested by Company, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by Company by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of ARTICLE 23-A OF THE NEW YORK CORRECTION LAW.

New York City Applicants Only: You acknowledge and authorize Company to provide any notices required by federal, state or local law to you at the address(es) and/or email address(es) you provided to the Employer.

Minnesota and Oklahoma Applicants Only: Please check this box, if you would like to receive a copy of a consumer report, if one is obtained by Company.

Washington State Applicants Only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Printed Name: _____

Signature: _____ Date: _____

CITY OF MUSCLE SHOALS

JOB DESCRIPTION

Title: Golf Course Maintenance Superintendent

Dept: Cypress Lakes

Job Analysis conducted: April 2015

Note: Statements included in this description are intended to be representative of the duties and responsibilities of this job and are not to be interpreted as being all inclusive. The employee may be assigned other duties that are not specifically included.

Relationships

Reports to: Cypress Lakes General Manager

Subordinate staff: All full time and part time golf course maintenance personnel

Other internal contacts: Parks and Recreation Employees

External Contacts: Vendors, Suppliers, Local Businesses, Golf Organizations, General Public

Job Summary

Under the direction of the General Manager, the employee is responsible for overseeing and providing technical and managerial supervision of the golf course grounds, facilities and equipment. Also, the employee is responsible for all phases of golf maintenance and agronomic operations, cost control, and personnel. The employee works closely with, advises, and coordinates with the General Manager on any issues related to golf course maintenance.

Job Domains

(*indicates essential functions in accordance with the ADA)

A. Supervision

1. * Hires, trains, and evaluates part time employees.
2. * Supervises staff in determining the need for irrigation, seedling rates, fertilization rates, sod cutting, cutting turf grass on fairways, tees, greens, and roughs; and raking sand traps.
3. Assigns daily duties and oversees employees to ensure duties are complete.
4. *Ensures that proper care and cultivation of shrubs, trees, and flowers; pruning, trimming and spraying is provided when needed.
5. *Ensures that the application of pesticides, fertilizer, fungicides, and insecticides are used for treatment of the course.
6. *Oversees repairs of broken lines or valves for water system, and may perform necessary repairs in times of emergency.
7. Assists in the planning and development of new irrigation systems, including redesigns and modifications of existing irrigation system.
8. *Ensures all workers are trained in the proper operation, care, and maintenance of equipment.
9. *Supervises maintenance and repair on assigned vehicles and equipment.

B. Administration and Planning

1. *Establishes and implements short and long range golf operation objectives.
2. *Assists General Manager with proposed budget recommendations.
3. *Makes recommendations to the General Manager concerning general grounds maintenance.

C. Miscellaneous

1. *Maintains detailed records of personnel, equipment used, supplies, and schedules indicating application of fertilizers, sprays, and chemicals, and the use of them for each season.
2. *Keeps detailed records of course activities such as fertilizing, cutting cups, spraying, etc
3. *Assists in preparing reports reflecting total hours of personnel and equipment used.
4. *Performs necessary general grounds maintenance work when needed or understaffed.

D. Public Relations

1. *Coordinates activities with General Manager and staff to maintain good public relations.
2. *Ensures that sound relationships are maintained between the maintenance staff and customers.
3. *Ensures that proper consideration is given to customer complaints and suggestions.
4. *Represents the facility at Golf Course Superintendent Association of America (GCSAA) meetings.

Knowledge, Skills and Abilities

(Any item with an asterisk can be taught on the job)

1. Ability to work with the public.
2. *Knowledge of city and departmental policies, procedures, rules and regulations.
3. Knowledge of safety rules including accident causation and prevention.
4. Knowledge of safety and health standards regarding golf operations.
5. Ability to deal effectively with supervisor and subordinates.
6. Ability to prepare and maintain records.
7. *Ability to coordinate and administer the golf operation policies as designed by the General Manager.
8. Ability to develop golf operation policies and procedures to employees.
9. Ability to develop long term goals to golf operation employees.
10. Ability to implement and monitor the golf operations budget, and monitor the quality of golf operation products and services that ensure the maximum value of services to the customer.
11. Ability to secure and protect the golf operation assets.
12. Knowledge of methods, equipment, and materials used in maintaining a golf course.
13. Ability to operate equipment used in the maintenance of golf course grounds.
14. Knowledge of general repair and maintenance procedures.
15. Knowledge of building and facilities management.
16. Excellent oral and written communication skills.
17. Ability to work independently without close supervision.
18. Knowledge of practices and principles of effective supervision.
19. Knowledge of mixing and administering chemicals used in treating turf.
20. Knowledge of automatic irrigation systems.
21. Skills in planning and assigning work to subordinates.
22. Ability to perform work requiring a moderate amount of physical stamina outdoors in a variety of weather conditions.
23. Ability to communicate effectively verbally, in writing, and electronically.
24. Knowledge of a personal computer including word processing and database software.

Other Characteristics

1. Possess a high school diploma or its equivalency.
2. Possess at minimum class "B" membership in the Golf Course Superintendent Association of America (GCSAA) or be able to obtain this membership classification within thirty (30) days of hire date.
3. Must have a minimum of three to five years of paid working experience at an eighteen hole golf facility within the golf maintenance operation as the superintendent or first assistant actively involved in staffing, payroll, daily assignments, etc.
4. Possess a current commercial pesticide applications certificate.
5. Possess a valid driver license and a driving record that meets the city's insurance carrier's requirements.
6. Ability to work non-standard hours, holidays, nights and weekends.
7. Ability to travel to attend seminars, conferences and workshops.

Work Environment

The work involves moderate risks or discomforts which require special safety precautions, e.g., working around moving parts, carts, or machines; with contagious diseases or irritant chemicals; etc. Employees may be required to use protective clothing or gear such as masks, coats, boots, goggles, or shields.

Physical Demands

The work requires some physical exertion such as long periods of standing; walking over rough, uneven, or rocky surfaces; recurring bending, crouching, stooping, crawling, stretching, reaching, or similar activities; recurring lifting of moderately heavy items. The work may require specific, but common, physical characteristics and abilities such as above-average agility and dexterity. The employee must frequently lift and or move items up to fifty pounds and occasionally lift and or move items more than one hundred pounds.

Approval

 _____
Name Title Date
11/22/2021