

EST. 1871

CITY OF NEW BRITAIN

DEPARTMENT OF PARKS, RECREATION, AND COMMUNITY SERVICES

WWW.NEWBRITAINCT.GOV

February 19, 2019

POSITION TITLE: Recreation Programmer

Part-Time: Up to 29/hours per week

GENERAL DESCRIPTION OF JOB:

Under the general direction of the Director of Parks, Recreation, and Community Services or his designated representative(s); performs professional duties in planning, developing, coordinating, implementing, and supervising recreation and athletic programs for the New Britain Parks, Recreation, and Community Services Department.

EXAMPLES OF DUTIES:

- Plans, coordinates, overseas and evaluates program(s).
- Responsible for arranging facility, equipment and staff.
- Responsible for staff payroll.
- Coordinates registration procedures.
- Prepares reports as needed.
- Responsible for the marketing of various events/programs

The duties listed above are intended only as general illustrations of the various types of work that may be performed. Specific statements of duties not included, do not exclude them from the position if the work is similar, related, or a logical assignment to the position.

DESIRABLE MINIMUM QUALIFICATIONS:

Education and Experience

• Preferred college graduate with a Bachelor's Degree in Recreation Management or similar field.

Special Requirements

• Preferred candidates with a valid Driver's License.



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KNOWLEDGE, ABILITIES AND SKILLS:

Must understand the need to represent other Departments in a professional manner. Must deal with people on a firm and cooperative level. Must have ability to multi task and communicate effectively with co-workers, supervisors, subordinates, and customers. Key attributes: following directions, good communication skills, good deductive reasoning and sound decision making.

PHYSICAL DEMANDS

While performing the duties of this job, the employee is frequently required to walk, stand, sit, use hands, and lift/move up to 50 pounds.

TOOLS & EQUIPMENT USED

Personal computer, including word processing software; adobe creative suite software; Rectrac 3.1 software; calculator; copy and fax machine; phone; mobile or portable radios; automobile; various sports equipment used in recreation programs, and other equipment as needed.

Interested candidates should submit a completed application, a resume, and a letter of recommendation to the New Britain Parks, Recreation, and Community Services Department (27 West Main Street, Room 302, New Britain, CT 06051) no later than March 8, 2019.

City of New Britain

Affirmative Action/Equal Employment Opportunity/Equal Access Employer

APPLICATION FOR EMPLOYMENT

27 West Main Street, New Britain, CT 06051 (860) 826-3404



(Print information in ink, or type)			Office Use Only		
1. Job Applying For					
			Q	V	
(use title on job announcement)	(exa	am no.)	NQ	DV	
2. Your Name					
			Edu	Rev. by:	
(print) Last Name	First	Middle	Exp.		
3. Address					
			Other		
(Number and Street, Road or Post Office Bo	x)				
			Score	Rank	
City	State	Zip Code			
4. Have you ever served in the U.S. Arr	ned Forces during periods o	f conflict?	5. Telephone Number (with	area code)	
Yes No			() -		
6. Are you over age 18?	7. Email Add	Iress	•		
Yes No					

8. Education

A. Did you graduate from high school?

Where?

Yes	No	Month	Year	If "No", highest grade completed

B. If you have a high school equivalency certificate,

give year and place the certificate was granted:

Year	Place

C. List any colleges, business schools, or technical school you attended:

Name of School	Location	Course or Major	Dates Attended	Degree

D. Other training (special courses, work training programs, armed forces training). Give name and location where training was given, dates attended, subject of training, and other details related to the job for which you are applying.

NOTE: Applications are kept on file for three (3) months from date of receipt unless otherwise noted.

9. EXPERIENCE: Start with your present or last job and work backwards listing all paid or unpaid, full or part-time work, military service, and summer jobs performed during the last 10 years. Use additional sheets of paper if necessary. Work performed more than 10 years ago may be given if it applies to the job for which you are applying.

May we contact your pro	esent employer?Yes	No
1) Starting Date Month/Year	Ending Date Month/Year	Name and Address of Employer
Your Job Title:	Hours per week	Name, title and telephone number of your Supervisor
Reason for leaving:		
Your duties:		
2) Starting Date Month/Year	Ending Date Month/Year	Name and Address of Employer
Your Job Title:	Hours per week	Name, title and telephone number of your Supervisor
Reason for leaving:	I	
Your duties:		
3) Starting Date Month/Year	Ending Date Month/Year	Name and Address of Employer
Your Job Title:	Hours per week	Name, title and telephone number of your Supervisor
Reason for leaving:	I	
Your duties:		

10. References: List the name, address and telephone number of three persons with knowledge of your character, experience and ability. Do not list relatives. Use professional, not personal, references. (Current and former employers, teachers/professors, etc.)

Name	Address	Tel
Name	Address	_Tel
Name	Address	Tel

11. Special Skills and Abilities. Show licenses, (including drivers); machines you operate; languages other than English which you speak, read and write well; typing and shorthand speeds, computer skills, and any other special abilities or knowledges relating to the job for which you are applying.

12. CERTIFICATION: I certify that all statements made on or in connection with this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I understand that incomplete, false, or inaccurate information may result in the rejection of this application and that false information may result in my dismissal if employed. I understand that I will be required to pass a medical examination and background check as a condition of appointment. As part of the medical examination process, I may be required to undergo a drug screen. The signing of this application will serve as consent to the drug screen examination.

CITY OF NEW BRITAIN CIVIL SERVICE COMMISSIN REQUEST FOR RESIDENCY CONSIDERATION

NOTE: THIS FORM IS TO BE COMPLETED BY CITY OF NEW BRITAIN RESIDENTS ONLY. IT DOES NOT IN ANY WAY AFFECT OR DIMINISH THE ABILITY OF NON-RESIDENTS TO COMPETE IN THE TESTING PROCESS. IT DOES HOWEVER, ALLOW THE POTENTIAL FOR ADDITIONAL CONSIDERATION FOR CITY RESIDENTS AFTER THE EMPLOYMENT LIST HAS BEEN CERTIFIED, BY CHAPTER UNDER THE "RULE OF FIVE PLUS THREE."

In order to qualify for residency consideration in accordance with City Charter and the Civil Service Commission Merit Rules, the Civil Service Office requires that candidates provide irrefutable evidence to substantiate that, at the date of application (no later than the closing date for applications) and at the date of certification for hire you are domiciled in the City of New Britain.

As the intention of the Charter amendment is to give those domiciled in the City of New Britain consideration in hiring, the Director of Personnel is directed to notify all applicants that the application of residency consideration is a privilege subject to being withdrawn if the applicant loses domiciliary status at any time after the filing of this application, including the initial certification of an employment list by the Civil Service Commission, as well as any time during the existence of any employment list.

For purposes of this Request, "DOMICILED" is defined to be, "that place where an individual has his true, fixed and permanent home and to which whenever he is absent he has the intention of returning."

You are required to complete and submit this form at the time of application in any event not later than the closing date for applications. You must also be prepared to submit any additional documentation that documents proof of domicile as the Director of Personnel may require. This information will be subject to verification by the Civil Service Office or any other agency or department designated by the Civil Service Commission. Attach copies of documents of proof of legal domicile to your application.

IMPORTANT NOTICE: THE APPLICANT BEARS THE BURDEN TO ESTABLISH PROOF OF LEGAL DOMICILE. ANY FALSE OR MISLEADING STATEMENTS WILL RESULT IN IMMEDIATE DISQUALIFICATION OR DISMISSAL. A DECISION TO DISQUALIFY SHALL BE FINAL.

If applicant is a current City of New Britain resident, complete and return this form to the City of New Britain with the "Application of Employment" Examination Number:_____

Position Applied For:

Name of Applicant:_____

PLEASE PRINT

I, hereby attest that I am a bona fide resident of the City of New Britain who, as of the closing date for applications for the examination/position above is domiciled within the City. Evidence to substantiate my claim for residency consideration is provided as follows:

CHECK ALL STATEMENTS WHICH APPLY

() 1._____own_____rent property in the City of New Britain at:

Street Address and Zip Code

I have been domiciled in the City since

If renting property, please provide the following:

Name of Landlord

Telephone #

Expires

() 2. My Connecticut Driver License indicates a New Britain address:

Operator Number

() 3. I own/lease a motor vehicle registered in the City of New Britain:

Make and Model of Vehicle

License Number

() 4. I am a registered voter in the City of New Britain.

- () 5. I have a child/children who attend school in the City of New Britain.
- () 6. I do not own or rent property outside of the City of New Britain.

If you do own or rent property outside of the City of New Britain, please explain:

I hereby certify that I acknowledge that this Request is an addendum to the Application and that ALL statements made by me on this application are true, complete and correct. I understand and agree that if I make any false or misleading statements of fact that I am subject to immediate disqualification, rescinding of certification, removal from the employment list, or dismissal, and to such other penalties prescribed by law of Civil Service Merit Rules or Charter. I also understand that this application for residency consideration is a privilege subject to being withdrawn if I lose domiciliary status at any time after the submission of the employment application.

Signature

Date

FOR OFFICIAL USE ONLY

Residency Consideration Given on Employment List.

- () Yes
- () No

If applicant is a current City of New Britain resident, complete and return this form to the City of New Britain with the "Application of Employment" ADDENDUM TO EMPLOYMENT APPLICATION: AFFIRMATIVE ACTION

APPLICANT DATA

Voluntary:

In order to meet State and Federal reporting requirements, we are requesting that you voluntarily supply the following information. This data will not be considered in the evaluation of your application; however, the information may be used in order to ensure compliance with the City's Affirmative Action Plan.

A.	Gender:	Female Male
B.	Race or 1	Ethnic Group (describe yourself in terms of one of the following groups):
	A.	White/Caucasian
	В.	Black/African American
	C.	Hispanic/Latino
	D.	Asian
	E.	American Native or Alaskan Native
	F.	Native Hawaiian or Other Pacific Islander
	G.	Two or More Races (persons who identify with two or more racial categories listed above)
		ent opportunity? Check the appropriate box(es) below: A. Hartford Courant
		B. New Britain Herald
		_C. Tiempo
		D. Hartford News
		E. Other newspaper:
		F. City Website
		G. Professional Journal:
		H. Human Resources Office
		I. Community Agency:
		J. Present City Employee
		K. Radio/TV advertisement
		L. Other: