

Please run the following job ad in the January 24th Newport Miner. Send a bill to the City of Newport, 200 S. Washington Avenue., Newport, WA 99156

PART-TIME JANITOR
City of Newport, Washington

Applicant is primarily responsible for cleaning City Hall, Police Station and Shop breakroom. This position is 10 Hours per week with no benefits. Monthly flat rate salary \$850.00. Current valid Washington or Idaho State Driver's License and the ability to pass background, fingerprinting and CJIS Security Awareness Training is required. Please contact Newport City Hall, 200 S. Washington Avenue, www.newport-wa.org or (509) 447-5611 for an application packet. Deadline: 01/31/2024 at 4:00 P.M. (EOE)

City of Newport Job Description

Job Title:	Janitor	Wage \$850 flat rate
Department:	Administration	Hours 10 hours per week
Reports To:	City Administrator	* Non Benefited Employee*
FLSA Status:	Non-Exempt	
Established Date:	November 20, 2023	

SUMMARY:

This position is primarily responsible for cleaning City Hall, Police Station and Shop breakroom.

ESSENTIAL DUTIES AND REPSONSIBILITIES:

- Clean locations of City Hall, Police Station and Shop Breakroom.
- Complete various custodial duties including but not limited to mopping, dusting, sweeping, bathrooms, emptying waste baskets, washing windows, walls and woodwork.
- May include use of mechanical equipment in stripping, waxing and washing floors, shampooing carpets.
- Periodic deep cleaning of blinds, fixtures and window sills, doors
- Document and log all issues and supplies found/ needed
- Respond to requests of Department Heads of each location in writing
- Ability to maintain strict confidentiality

QUALIFICATIONS:

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed are representative of the knowledge, skill, and/or ability required.

CERTIFICATES, LICENSES, REGISTRATIONS:

- Washington or Idaho State Driver's License
- Be able to pass background, fingerprinting and CJIS Security Awareness Training

EDUCATION:

- High school diploma or general education degree (GED).

LANGUAGE SKILLS:

Ability to read and comprehend simple instructions, short correspondence, and memos. Ability to write simple correspondence. Ability to effectively present information in one-on-one and small group situations to citizens and other employees.

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 functions.

While performing the duties of this job, the employee is regularly required to use hands to finger, handle, feel or operate objects, tools, or controls and reach with hands and arms. The employee frequently is required to stand and talk or hear. The employee is occasionally required to walk, sit, climb or balance, stop, kneel, crouch, or crawl, smell and be in high areas accessed by ladder.

The employee must frequently lift and/or move up to 10 pounds and occasionally lift and/or move up to 40 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and the ability to adjust focus.

APPLICATION FOR EMPLOYMENT

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For		Date of Application
How Did You Learn About Us?		
<input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Inquiry <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other _____		
Last Name	First Name	Middle Name
Address	Number	Street
		City
		State
		Zip Code
Telephone Number(s)		Social Security Number (voluntary)

Best time to contact you at home is: : ^{AM}/_{PM}

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? If Yes, give date Yes No

Have you ever been employed with us before? If Yes, give date Yes No

Do any of your friends or relatives, other than spouse, work here? Yes No

If Yes, state name, relationship and location _____

Are you currently employed? Yes No

May we contact your present employer? 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

Date available for work _____ What is your desired salary range? _____

Are you available to work: Full Time (Please indicate 1 2 3 shift)
 Part Time (Please indicate Mornings Afternoon Evenings)
 Temporary (Please indicate dates available _____ - _____)

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

Can you travel if a job requires it? Yes No

EDUCATION

School	Name and Address of School	Course of Study	Number of Years Completed	Diploma / Degree
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

ADDITIONAL INFORMATION

State any additional information you feel may be helpful to us in considering your application, including any job related training in the U.S. Military.

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. Exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
Starting/Present Job Title	Starting	Final	
Supervisor			
Reason for Leaving	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
Starting/Present Job Title	Starting	Final	
Supervisor			
Reason for Leaving	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
Starting/Present Job Title	Starting	Final	
Supervisor			
Reason for Leaving	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No		

REFERENCES **Do not include family members or past supervisors.**

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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 Employer.

Signature of Applicant

Date

CITY OF NEWPORT
WAIVER/AUTHORIZATION TO RELEASE INFORMATION

This document affects your legal rights.
Read carefully before signing.

To Whom It May Concern:

I the undersigned request and authorize you to furnish to the City of Newport any and all information that you have concerning me. To include, however not limited to work record, criminal/ traffic violation history, driver's license record, and such other information and records you may have in your possession relating to me. Information of a confidential or privileged nature may be included in the materials you provide to the City of Newport. Your reply will be used to assist the City of Newport in determining my qualifications for a position with the City of Newport.

I understand my right to request access to public records relating to me pursuant to Title 5 of the United States Codes, Section 522. et seq., the privacy Act of 1974, the Freedom of Information Act, and the Revised Code of Washington (RCW) 42.17 et seq., and specifically waive those rights understanding that the information furnished will be used by the City of Newport in conjunction with this employment procedure. I will make NO attempt to gain access to the information provided to City of Newport in conjunction with employment procedures.

I hereby do release you, your organization, your agents and others from any liability or damages which may result from furnishing information to the City of Newport pursuant to this waiver and authorization to release information. Should there be any questions as to the validity of this waiver and authorization to release information form, you may contact me as indicated below.

Date

Applicant's Signature

Social Security Number

Applicant's Printed Full Legal Name

Date of Birth

Current Address

Driver's License No.# and State of Issuance

Telephone Number