



CITY OF MILFORD

SEASONAL EXAM NO. 22-32

GRASS CUTTER-SEASONAL

POSTING DATE: February 25, 2022

CLOSING DATE: Open until filled

NOTICE TO ALL APPLICANTS: This opening is available to the general public.

SUMMARY OF POSITION: Under the general supervision of a Highway-Parks Foreman or designee, performs unskilled and limited semi-skilled manual work. Performs a variety of tasks in park areas, sports facilities and playgrounds as assigned and operates equipment. Lays out and maintains sports playing fields, such as baseball and softball fields and related play areas. Uses tools such as lawn mower, weed wacker, etc. to perform the assigned tasks.

KNOWLEDGES, SKILLS AND ABILITIES REQUIRED

- Some knowledge of materials, methods and equipment used in groundskeeping and landscaping.
- Ability to understand and follow simple oral and written instructions.
- Physical strength sufficient to perform a variety of routine manual tasks in ground maintenance.
- Knowledge of safety practices and compliance thereof.

FILING REQUIREMENTS: Applicants are required to submit a fully complete a **Seasonal Employment Application, resume**, must be submitted to the Human Resources Department, Parsons Government Complex, 70 W. River St., Milford, CT 06460 or HRrecruit@milfordct.gov. For forms and detailed application instructions, go to www.ci.milford.ct.us/hr/pages/jobs then select Grass Cutter-Seasonal.

SALARY RANGE: The position is hourly salary limits are as follows based on experience:

Minimum	\$13.00
Maximum	\$15.00



SEASONAL EMPLOYMENT APPLICATION - PUBLIC WORKS

DO NOT WRITE IN THIS SPACE

☐ Q Rev. by: _____

☐ NQ

Reason: _____

Human Resources Department
City of Milford
70 West River Street
Milford, CT 06460
(203) 783-3239

Position applying for _____

Date _____

PLEASE TYPE OR PRINT CLEARLY IN BLACK OR BLUE INK.

Entire application must be completed in order for application to be considered.

An Equal Opportunity Employer

PERSONAL INFORMATION

Last Name _____ First Name _____ M.I. _____ 000- _____
Last 6 digits of Soc. Sec. No. _____

Home Address _____ City _____ State _____ Zip _____

Home Telephone _____ Mobile _____ Email _____

Are you legally eligible for employment in the U.S.? Yes No Are you 18 years of age or older? Yes No
(If hired, you will be required to provide proof of eligibility)

List any relatives or members of your household who are currently employed with the City of Milford

Name(s) _____ Job Title _____ Department _____

Are you able to perform the essential functions of this job? Yes No Date available to start _____

EMPLOYMENT HISTORY

Have you ever been discharged or asked to resign from a job? Yes No If yes, please explain: _____

Have you previously worked for the City of Milford? Yes No If yes, dates of employment: _____

Position/Title: _____

List below **ALL** present and past employment. **BEGIN WITH YOUR MOST RECENT EMPLOYMENT AND WORK BACKWARDS CONSECUTIVELY.** Applicants may be required to furnish satisfactory proof of employment history. Use additional pages if necessary. **Include resume with completed application, however, resume WILL NOT substitute completion of application.**

Employer	Address	Phone
Dates of Employment	Job title	Hours per week
Supervisor's name/title	Reason for leaving	
Number of employees supervised (i/a)	Describe work performed below DO NOT WRITE "SEE RESUME":	

Employer	Address	Phone
Dates of Employment	Job title	Hours per week
Supervisor's name/title	Reason for leaving	
Number of employees supervised (i/a)	Describe work performed below DO NOT WRITE "SEE RESUME":	

EDUCATION				
High School(s) attended		City/State		Did you graduate?
				Yes No
				Yes No
College/Institution attended	City/State	Did you graduate?	Degree/Certification/Credits	Major
		Yes No		
		Yes No		
		Yes No		

SPECIAL SKILLS				
Snowplowing: Describe any experience you may have had snowplowing. Please include the size of the plow(s) you have driven, number of months/ years of experience and type of area(s) plowed (roads, driveways, parking lots, etc.)				
Light Equipment: What best describes your skill level with a payloader? <input type="checkbox"/> Excellent <input type="checkbox"/> Very good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Never Used What best describes your skill level with a backhoe? <input type="checkbox"/> Excellent <input type="checkbox"/> Very good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Never Used What best describes your skill level with a small tractor? <input type="checkbox"/> Excellent <input type="checkbox"/> Very good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Never Used Heavy Equipment: What best describes your skill level with a grader? <input type="checkbox"/> Excellent <input type="checkbox"/> Very good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Never Used What best describes your skill level with a Cat 225 excavator? <input type="checkbox"/> Excellent <input type="checkbox"/> Very good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Never Used What best describes your skill level with a bulldozer? <input type="checkbox"/> Excellent <input type="checkbox"/> Very good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Never Used				
Other Training/Skills: Please list/describe any specialized training, apprenticeship, certifications, licenses, skills, special skills and qualifications related to the job for which you are applying, such as machines you are able to operate, languages you speak and read or write well, computer skills besides those mentioned in the previous page, and any other special abilities or knowledge. Give name and location where training was given, dates attended, subject of training, total number of training hours, and other details.				

DRIVER'S LICENSE				
If the position for which you are applying requires you to operate a vehicle, you must possess a valid driver's license and any special endorsements must be current and valid. NOTE: If applicable, if you are offered employment by the City of Milford, and if your driver's license is from another state, you will be required as a condition of employment to obtain a valid Connecticut Driver's License before you can begin work.				
Do you have a valid driver's license? Yes No State _____		Do you have a CDL? Yes No		
Expiration Date _____		Classification _____ License # _____		
Endorsements _____				
FINALISTS WILL BE REQUIRED, UPON NOTIFICATION, TO SUBMIT A COPY OF THEIR DRIVING ABSTRACT. Note: Driving abstracts may be obtained at any Connecticut Department of Motor Vehicles office. This fee is at the finalist's expense.				

I affirm and certify that I have read all of the information above and that all answers to the questions herein are complete, true and accurate to the best of my knowledge. I understand that any misrepresentation, falsification or omission of any facts may render this application void and will be cause for disqualification, whenever discovered.

SIGNATURE APPLICANT _____

DATE _____



INVITATION TO SELF-IDENTIFY

City of Milford

Position applying for
(use the title that appears on the job announcement)

SECTION 1: CANDIDATE INFORMATION

It is the policy of the City of Milford to recruit, hire, and promote qualified people in all job classifications regardless of age, race, gender, color, religion, creed, national origin, marital or veteran status, sexual orientation, gender identity or expression, disability or any other legally protected status, unless they are bona-fide occupational qualifications.

The following information is needed for compliance with governmental reporting requirements. While completion of this section is voluntary, all applicants are strongly urged to complete this as part of the pre-employment process. Applicants so choosing, may identify on the form that they have chosen not to provide the City of Milford with the requested information by checking the appropriate box in Section 4. This information will not affect in any way your employment opportunities. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable federal laws, executive orders, and regulations, including those which require the information to be summarized and reported to the Federal Government for civil rights enforcement purposes.

SECTION 2: GENERAL INFORMATION

Name _____ Date _____

Social Security Number 000 _____ (Last six digits ONLY)

SECTION 3: STATISTICAL INFORMATION

PLEASE ANSWER THE FOLLOWING QUESTION:

What is your race/ethnicity? (Please mark the ONE BOX that describes the race/ethnicity category with which you primarily identify.)

- American Indian or Alaska Native** ☐ (Not Hispanic or Latino) All persons having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Asian** ☐ (Not Hispanic or Latino) All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Phillipine Islands, Thailand, and Vietnam.
- Black or African American** ☐ (Not Hispanic or Latino) All persons having origins in any of the black racial groups of Africa.
- Hispanic or Latino** ☐ All persons of Cuban, Mexican, Puerto Rican, Central or South America, or other Spanish culture or origin, regardless of race.
- Native Hawaiian or Other Pacific Islander** ☐ (Not Hispanic or Latino) All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands.
- White** ☐ (Not of Hispanic or Latino origin.) All persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Two or more races** ☐ A person who primarily identifies with two or more of the above race/ethnicity categories.
- Gender** ☐ Male ☐ Female

SECTION 4: NON-PARTICIPATION

Please check box if applicable

I have read the above statement and have chosen not to complete this form. ☐

SECTION 5: RECRUITING INFORMATION

How did you hear about this job? (Please check one.)

<input type="checkbox"/> Milford Mirror	<input type="checkbox"/> Human Resources or Department Bulletin Board
<input type="checkbox"/> Other newspaper (give name):	<input type="checkbox"/> Community Agency (give name):
<input type="checkbox"/> City Website	<input type="checkbox"/> Professional Journal (give name):
<input type="checkbox"/> Internet (list site):	<input type="checkbox"/> Other (please specify):
<input type="checkbox"/> City Employee	