

RIVERVIEW CEMETERY DISTRICT

4700 Hovley Road ~ P.O. Box 597 Brawley, CA 92227 Phone: (760) 344-4921 ~ Fax: (760) 344-7965 office@rvcdistrict.com

www.riverviewcemeterydistrict.com

Employment Application

Please Print Date	An Equal Opportun	ity Employer				
Present Address No. & Street City State Zip Code Permanent Address (if different from present address) No. & Street City State Zip Code Business Phone Home Phone Employment Desired Position applying for: Personal Information How did you hear about our company and this job opening? Have you ever applied to or worked for	Please Print		-			
No. & Street Permanent Address (if different from present address) No. & Street City State Zip Code Displayment Desired Position applying for: Personal Information How did you hear about our company and this job opening? Have you ever applied to or worked for before? Yes	Date	Last Name	First Name		Middle	
Permanent Address (if different from present address) No. & Street City State Zip Code Business Phone Home Phone Employment Desired Position applying for: Personal Information How did you hear about our company and this job opening? Have you ever applied to or worked for before? Yes	Present Address					
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Employment Desired Position applying for: Personal Information How did you hear about our company and this job opening? Have you ever applied to or worked for	No. & Street			City	State	Zip Code
Personal Information How did you hear about our company and this job opening? Have you ever applied to or worked for	Business Phone	Home Phone				
Personal Information How did you hear about our company and this job opening? Have you ever applied to or worked for	Employment Desi	red				
Have you ever applied to or worked for	Position applying for	or:				
Have you ever applied to or worked for	Personal Informat	tion				
Mara whee 2	How did you hear a	about our company and t	his job opening? _			
Maran when 2	Have you ever appl	lied to or worked for			befo	ore? Yes No
	If yes, when?)	
Why are you applying for work at?	Why are you applyi	ing for work at				?

Emplo	yment Applica	tion				
If hired, v	would you have a relial	ole means of	f transportation t	o and from work?	Yes	No
Are you a	at least 18 years old? (If n legal age.)	under 18, h	ire is subject to v	erification that you ar	re of Yes	□ No
Are you a with or w	ble to perform the essithout reasonable acco	ential function	ons of the job for	which you are applyi	ng, either Yes	□ No
	, describe the function					
						<u> </u>
		<u></u>				
(Note perfo	:: We comply with the ADA a rm essential functions. Hire	nd consider rea may be subject	asonable accommoda to passing a medical	ation measures that may be examination, and to skill a	e necessary for eligible appl nd agility tests.)	icants/employees to
We may re supervision	efuse to hire relatives on, security, safety, or r	of present er norale, or if	mployees if doing doing so could cr	gso could result in act eate conflicts of inter	tual or potential proble est.	ems in
Educatio	n, Training, and Expe	rience				
School	Name and Address			No. of Years Completed	Did you Graduate?	Degree or Diploma
High School					Yes No	
	Name				<u> </u>	
	Address		·			
	City	State	Zip Code	_		
College/ University	Name		·	-	Yes No	···
	Address			 -		
	City	State	Zip Code	_		

Employment Application

School	Name and Address			No. of Years Completed	Did you Graduate?	Degree o Dipioma
Vocational/ Business					☐ Yes ☐ No	0,5.0
	Name	-				
	Address	·	<u>.</u> .	· · · · · · · · · · · · · · · · · · ·		
	City	State	Zip Code			
lealth Care					Yes No	
	Name					
	Address	 		·		
ist below	ent History all present and past complete this sectio	State employment n even if attac	Zip Code starting wit hing a resu	h your most recent empl me.	loyer (last five years is suf	ficient).
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Phone Number Name of Employer Type of Business Your Supervisor's Name Address & Street Cîty State Zip Code Dates of Employment: To From Your Position and Duties Reason for Leaving May we contact this employer for a reference? Note: Attach additional page(s) if necessary. References List below three persons not related to you who have knowledge of your work performance within the last three years. First Name Last Name Phone Number Address & Street City Zip Code State Occupation No. of Years Acquainted First Name Last Name Phone Number Address & Street City State Zip Code Occupation No. of Years Acquainted First Name Last Name Phone Number Address & Street City State Zip Code

No. of Years Acquainted

Employment Application

Occupation

Employment Application

Please R	ead Carefully, Init	ti al Each Paragraph and Sign Belov	٧	
Initials	chances for em knowledge. I fu I understand the used to secure	nployment and that the answers give urther certify that I, the undersigned nat any omission or misstatement of	any information that might adversely affect my on by me are true and correct to the best of my applicant, have personally completed this application. material fact on this application or on any document jection of this application or for immediate discharge fore discovery.	
	I hereby autho	rize	to thoroughly investigate my	
Initials	have listed to o work records, v my former emp	round information) unless otherwise disclose to the company any and all l vithout giving me prior notice of suc ployers and all other persons, corpor	ers related to my suitability for employment (excluding specified above. I further authorize the references letters, reports and other information related to my h disclosure. In addition, I hereby release the Company, ations, partnerships and associations from any and all way related to such investigation or disclosure.	
Initials	granted or duri and the Compa definite or dete option of eithe	ing my employment, if hired, is inten any. In addition, I understand and ag erminable period and may be termin r myself or the Company, and that no pinding on the company unless mad	ion, or conveyed during any interview which may be ded to create an employment contract between me ree that if I am employed, my employment is for no ated at any time, with or without prior notice, at the promises or representations contrary to the in writing and signed by me and the Company's	
Initials	In compliance with federal law, all persons hired will be required to verify identity and eligibility to wor in the United States and to complete the required employment eligibility verification document form upon hire.			
The Com with stat	pany will conside te and local "Fair	er qualified applicants, including the Chance laws.	nose with criminal histories, in a manner consistent	
	Date	Applicant's Signature		



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Job Classification Description

TEMPORARY GROUNDSKEEPER

JOB SUMMARY:

Under general supervision, the temporary groundskeeper performs a variety of routine to skilled tasks in the maintenance care, landscaping, and edging using a variety of tools and equipment under the direction of the Lead Groundskeeper.

You need to be at least 18 years old at the time of hire with 2 years of experience in landscaping, preferred. Available to work Monday thru Friday between 5:30am to 2:00pm. Be able to operate a variety of equipment and tools as well as lift 20-30 pounds. This is an outdoor position with minimal supervision and be able to understand and follow verbal directions.

ESSENTIAL DUTIES & RESPONSIBILITIES:

- Cleans and maintains landscaped areas; picks up litter, garbage, and debris.
- Follow all safety guidelines for the operation of equipment and tools.
- Edges, mows, seeds, and waters lawns throughout cemetery grounds.
- Maintains and performs work around grave markers, monuments, head stones and trees.
- Provides assistance to service attendants, mortuary directors, and families as needed.
- Performs other duties as assigned.

MINIMUM QUALIFICATIONS:

Education and Experience

High School Diploma or G.E.D. preferred; AND two (2) years of experience in grounds maintenance and operations, preferably in a cemetery; or an equivalent combination of training and experience.

Licenses, Certifications, and Equipment

A State of California driver's license.

Physical Requirements and Work Environment

Employees regularly work in outside weather conditions and/or near moving mechanical parts. Employees are frequently exposed to wet or humid conditions. Employees are occasionally exposed to outdoors, heat, noise, vibration, and confining workspace. The employee frequently is required to stand and talk or hear; walk; sit; climb or balance stoop, kneel, crouch, or crawl. The employe must frequently lift and/or move up to 50 pounds.

EEO Statement:

- Riverview Cemetery District provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to an individual's race (including, but not limited to, hair texture and protective hairstyles such as braids, locks, and twists), color, religion, religious creed (including religious dress and grooming practices), national origin, ancestry, citizenship, physical or mental disability, medical condition (including cancer and genetic characteristics), genetic information, marital status, reproductive health decision-making, sex (including pregnancy, childbirth, breastfeeding, or related medical conditions), gender (including gender identity and gender expression), age (40 years and over), sexual orientation, veteran and/or military status, protected medical leaves (requesting or approved for leave under the Family and Medical Leave Act or the California Family Rights Act), domestic violence victim status, political affiliation, or any other status protected by federal, state, or local laws.
- This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation, and training.

Other Duties:

 Please note this job description is not designed to cover or contain a comprehensive listing of activities, duties or responsibilities that are required of the employee for this job. Duties, responsibilities, and activities may change at any time with or without notice.

Superv	visor Name: Diane Derma
•	Supervisor Signature: Supervisor Signature:
•	Date:
	rstand the requirements, essential functions, and duties of this position. Employee Signature:
•	Date: