

Friends of the Corpus Christi Museum of Science & History 1900 N Chaparral Street Corpus Christi, TX 78401 (361) 826-4667

Job Title: Facilities Custodian

**Status**: Part-Time/Seasonal, 29 hours or less per week

FLSA Code: Non-Exempt

Salary: Hourly Rate: \$13.00 Reports to: Facilities Manager

Supervisory Responsibilities: This job has no supervisory responsibilities

Who May Apply: All persons legally authorized to work in the United States and meet minimum

education and experience

#### **POSITION SUMMARY:**

The Corpus Christi Museum of Science and History (CCMSH) is dedicated to providing high quality engaging educational programs and museums experiences for visitors of all ages. The Facilities Custodian is a part-time position, offering custodial and support services for all CCMSH facilities, activities, exhibits, and events. Custodial staff ensures that CCMSH delivers a clean, safe, and healthy environment for all guests and staff. The Museum Custodian will have a good understanding of many cleaning techniques, cleaning tools and proper use of cleaning chemicals. Requires the ability to work evenings and weekends occasionally during special events or projects. This is a part-time/seasonal position.

#### **ESSENTIAL DUTIES AND RESPONSIBILITIES**

#### Main Areas of Responsibilities:

- Provide general custodial service as assigned or needed utilizing best practice for safety, efficiency, and environmental concerns.
- Provide support services for events, exhibits, and activities.
- Provide timely and successful response to guest and staff requests.
- Properly maintain equipment and supply closets and provide the supervisor with necessary information regarding repair and inventory levels.
- Project a positive and helpful demeanor to all of our guests and CCMSH staff.
- Clean building floors by sweeping, mopping, scrubbing or vacuuming.
- Operate floor machine as needed on tile, hardwood, and concrete floors.
- Gather and empty trash.
- Service, clean bathrooms, and ensures bathrooms furnished with necessary supplies
- Dust/polish furniture and fixtures.
- Clean windows, glass partitions, mirrors, and stainless steel, using appropriate methods.
- Mix water and detergents in containers to prepare cleaning solutions, according to specifications.
- Follow procedures for the use of chemical cleaners and power equipment, to prevent damage to floors and fixtures.
- Clean and maintain building exterior walkways, steps, ramps, and entrances.
- Set up, arrange, and remove decorations, tables, chairs, ladders, to prepare facilities for events such as exhibition openings, private events, and meetings.
- Assures that cleaning checklist and daily assignments completed during the shift
- Report unsafe conditions (repairs), damages and acts of vandalism of equipment to proper channels of communication/ authorities.
- Maintain an adequate supply of cleaning material and supplies in custodial closets.



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## **Education and Experience**

- High School diploma or equivalent.
- Minimum 1 to 3 years' experience as a custodian, janitor, or building technician.

## Qualifications, Knowledge, Skills, and Abilities required

- Displays a well composed, professional attitude at all times, especially when working in the public eye.
- Interacts with patrons and the public in a respectful, professional manner.
- Weekend schedule, occasional flexible hours as situations arise.
- Positive attitude.
- Comfort in working with families and children.
- Skilled in attention to detail.
- Safe handling of cleaning chemicals & equipment.

#### Other

- 1. Able to lift at least 50 lbs.
- 2. Comfortable walking/standing for extended periods of time.
- 3. Flexible work schedule
- 4. Other duties as assigned.

### Compensation

- 1. Hourly wage: \$13.00
- 2. Benefits based upon employment status
- 3. Free parking.

## **Closing Statement**

- Selected applicants must be able to pass a background investigation.
- Any position that lists a minimum qualification for education level and license/certification will require the applicant to provide proof of documentation if selected for hire.
- Submit application, background authorization, and cover letter to karens3@ccmuseum.com



# 1900 N. Chaparral St. Corpus Christi, TX 78401

## **EMPLOYMENT APPLICATION**

Your application will be reviewed in detail. The decision on which applicants will be interviewed will be based on the information you provide within the format given herein. You may attach your resume to this application but it will not be accepted in lieu of an application.

Our policy is to provide equal employment to all qualified persons without regard to race, creed, color, religious belief, sex, sexual orientation, age, national origin, ancestry, physical or mental disability or veteran status.

| PERSONAL INFORMATION:  |                |      |     |
|--|----------------|------|-----|
| Name:  |                |      | -   |
| Complete Home Address:   |                |      | -   |
| City, State, Zip:  |                |      | -   |
| Day Phone:   | Evening Phone: |      |     |
| Email Address:   |                |      |     |
| Are you a U.S. citizen or authorized by INS to work? (Documentation will be required) □Yes         |                | □No  |     |
| Have you ever been convicted of a felony? (This will not necessarily affect your application) □Yes |                | □Yes | □No |
| If yes, please explain:  |                |      |     |
| Are you bi-lingual? □Yes □No In what langu   | age/languages? |      |     |
| EMPLOYMENT DESIRED:  |                |      |     |
| Position applying for:   |                |      | _   |
| Have you ever applied for employment here?   |                | □Yes | □No |
| When   | What position? |      | -   |
| Have you ever been employed by this company?   |                | □Yes | □No |
| When   | What position? |      |     |

| Are you presently employed? □Yes □No                           | May we contact your                   | present employer? □Yes □No          |
|--|---------------------------------------|-------------------------------------|
| Supervisor Name:   | Position:                             |                                     |
| Contact Telephone Number:                                      |                                       |                                     |
| Are you willing to travel? □Yes □No                            | Do you have a                         | an automobile? □Yes □No             |
| Valid Driver's License Number:                                 |                                       | State:                              |
| Can you provide proof of auto insurance?                       | □Yes □No Date you can b               | egin employment:                    |
| EDUCATION:   |                                       |                                     |
| EDUCATION:   |                                       |                                     |
| High School  | Location                              | Graduate □Yes □No                   |
| College  | Location                              | GED                                 |
| College  | Location                              | Degree Obtained and Major           |
|  |                                       |                                     |
| Can you provide proof of your education?                       | □Yes □No (Document                    | ation will be required)             |
| Are you planning to continue your studies?                     | □Yes □No                              |                                     |
| If yes, where and what courses of study? _                     |                                       |                                     |
| in yes, where and what courses of study!                       |                                       |                                     |
| COMPUTER SKILLS:   | Typing                                | g Speed in WPM:                     |
| <ul> <li>List all the Computer Software that yeach.</li> </ul> | you are <b>proficient</b> in and desc | cribe your experience and skills in |
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WORK EXPERIENCE: Please list employment for the last five-(5) years starting with most recent employment.

| Employer:           | Date From | Date To  |  |
|---------------------|-----------|----------|--|
| Address:            |           | <u> </u> |  |
| Position/Title:     |           |          |  |
| Responsibilities:   |           |          |  |
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|                     |           |          |  |
|                     |           |          |  |
| Reason for Leaving: |           |          |  |
|                     |           |          |  |
| Employer:           | Date From | Date To  |  |
| Address:            |           |          |  |
| Position/Title:     |           |          |  |
| Responsibilities:   |           |          |  |
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| Reason for Leaving: |           |          |  |
|                     |           |          |  |
| Employer:           | Date From | Date To  |  |
| Address:            |           |          |  |
| Position/Title:     |           |          |  |
| Responsibilities:   |           |          |  |
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|                     |           |          |  |
| Reason for Leaving: |           |          |  |
|                     |           |          |  |
| Employer:           | Date From | Date To  |  |
| Address:            |           | l l      |  |
| Position/Title:     |           |          |  |
| Position/Title:     |           |          |  |
| Responsibilities:   |           |          |  |
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| REFERENCES:   | 1630 A   |
|---|--|
| List three references (two of whom must be former employers more than one year.                               | s), not related to you, whom you have known    |
| Name:   | Phone:   |
| Address:  | Years Known:                                   |
| Name:   | Phone:   |
| Address:  | Years Known:                                   |
| Name:   | Phone:   |
| Address:  | Years Known:                                   |
| and why:  |  |
| Please tell us which responsibilities outlined in the accompanying even difficult for you to fulfill and why: | g job description will be most challenging or  |
| Please help us make an informed decision on you as an applicant other qualified applicants?                   | nt. What is it that makes you stand apart from |
| Please list your anticipated rate of compensation for this position:  | : \$   |
| (applications without this information will not be considered   |  |

Thank you for your time and careful consideration in completing this application. Please be assured that we will also take time and careful thought in our consideration.

## PLEASE READ BEFORE SIGNING:

I acknowledge the importance of telling the truth on this application and any associated documents (herein "application"). I affirm that all of the information provided by me on this application is true to the best of my knowledge. The information is also not intended to mislead The Corpus Christi Museum of Science and History in any way about my qualifications or background. If I have omitted any information or provided information that is false or misleading, my application will be rejected, and I will not be eligible for employment. In addition, if it is later learned that any information on this application is false or misleading, that I may be subject to discipline up to and including immediate discharge.

I authorize my previous employers, schools, or persons listed as a reference to give any information regarding employment or educational record. I agree that The Corpus Christi Museum of Science and History and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any employment with this organization, I will comply with all rules and regulations set by the organization in any communication distributed to the employee.

I understand that employment with The Corpus Christi Museum of Science and History is "at will" which means that either this organization, or I may terminate the employment relationship at any time, with or without prior notice.

| notice.              | Tinay terminate the employment relation | iomp at any amo, mar or marout prior |
|----------------------|---|--------------------------------------|
| Applicant Signature: |   | Date:                                |



# **DISCLOSURE FOR CONSUMER REPORTS**

In connection with my application for employment (including contract or volunteer services) with CCMSH \_\_\_\_, I understand consumer reports will be requested by you ("Company"). These reports may include, as allowed by law, the following types of information, as applicable: names and dates of previous employers, work experience, education, accidents, licensure, credit (as allowed by law - where required, you will be presented with additional disclosures), etc. I further understand that such reports may contain public record information such as, but not limited to: my driving record (which will include all or part of the following information: photograph, social security number, driver's license number, your name, your address and medical or disability information), workers' compensation claims, judgments, bankruptcy proceedings, evictions, criminal records, etc., from federal, state, and other agencies that maintain such records. In addition, investigative consumer reports (gathered from personal interviews, as applicable, with former employers or landlords, past or current neighbors and associates of mine, etc.) to gather information regarding my work or tenant performance, character, general reputation and personal characteristics, and mode of living (lifestyle) may be obtained. If I am hired, I understand that my employer can use this disclosure and authorization to continue to obtain such consumer reports throughout my employment, contract period or volunteer service. Acknowledged: Signature Date Printed Full Name



# **AUTHORIZATION**

I hereby authorize procurement of consumer report(s) and investigative consumer report(s) by CCMSH ("Company") and its consumer reporting agency Intelifi. If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for Company to procure such reports at any time during, as permitted by law, my employment, contract, or volunteer period. I authorize without reservation, any person, business or agency contacted by the consumer reporting agency to furnish the above-mentioned information.

| In connection with my application for employment, I direct the following regarding my current employer: (please check one). Yes, my current employer may be contacted/ No, my current employer cannot be contacted/  |
|--|
| I understand that I have rights under the Fair Credit Reporting Act, and I acknowledge receipt of the Summary of Rights (initials).  |
| I authorize Company and Agency to use email communication with me to provide me with notices and information regarding any report or use of such report. If I do not have an email address or do not wish to share it, then communication will be by U.S. Mail, which will result in slower communication. |
| If you have any questions concerning this background screening content, please contact: Intelifi at (888) 409-1819.  |
| Printed Full Name:   |
| Signature:   |
| Date:/   |
| Email:; I do not have or want email  |
| (Initial) List mailing address:  |
| For identification purposes:   |
| Social Security No.:; Date of Birth:   |
| Driver's License No.:; State of Issue:   |
| Other Names Used:  |
| Other Names Used:  |



## INFORMATION REGARDING YOUR RIGHTS

I understand that I have the right to make a request to the consumer reporting agency: Intelifi ("Agency"), 8730 Wilshire Blvd, 4th Floor, Ste. 412, Beverly Hills, CA 90211, telephone number (888) 409-1819, upon proper identification, to obtain copies of any reports furnished to Company by the Agency and to request the nature and substance of **all information** in its files on me at the time of my request, including the sources of information. The Agency will also disclose the recipients of any such reports on me which the Agency has previously furnished within the two year period for employment requests, and one year for other purposes preceding my request (California three years). I understand that I can dispute, at any time, any information that is inaccurate in any type of report with the Agency. I may view the Agency's privacy policy at their website: www.intelifi.com.

I understand that if the Company is located in California, Minnesota or Oklahoma, that I have the right to request a copy of any report Company receives on me at the time the report is provided to Company. By checking the following box, I request a copy of all such reports be sent to me.

| Check here:   |
|---|
| I understand that if I am applying for employment in New York, that I have the right to receive a copy of Article 23-A of the New York Correction Law(initial if this applies).   |
| I understand that if the report is provided to an employer in the State of Washington, that I can contact the following office for more information regarding my rights under Washington state law in regard to these reports: State of Washington Attorney General, Consumer Protection Division, 800 5th Ave, Ste. 2000, Seattle, Washington 98104-3188, (206) 464-7744.  |
| New Hampshire registered drivers: The consent for driving records is valid for only two (2) years and is revocable at any time.   |
| <b>Personal information</b> in MVRs means information that identifies you, such as your photograph, social security number, driver's license number, your name, your address, your telephone number and medical or disability information relating to any license restrictions. <b>Highly restricted personal information</b> includes your photograph or image, social security number, medical or disability information relating to any license restrictions. 18 U.S.C. §2725. |
| Acknowledged:   |
|   |
| Signature Date  |