

Job Announcement, Seasonal Laborer



Town of West Yellowstone, Montana

Position Title	Public Services Seasonal Laborer
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The Town of West Yellowstone is seeking applicants for Public Services Seasonal Laborers. This is a Full-Time, Limited-Term position, not to exceed five (5) months.

General Duties

The general duties of this position are to perform routine maintenance of parks, public facilities, and grounds, including right-of-ways, streets, and sidewalks. Performs directly related work as required.

Wage and Benefits

Wage: \$20.35 per hour, wage will adjust to \$21.37 as of July 1, 2025. Limited-Term employees are eligible for sick leave accrual after ninety (90) days and limited health and life insurance benefits.

Additional Information

- For application form or detailed position description, please contact the Town of West Yellowstone Town Office- 440 Yellowstone Avenue, PO Box 1570, West Yellowstone, MT. 59758, call 406-646-7795, or visit <http://www.townofwestyellowstone.com>
- This position is open until filled.
- Applications that are incomplete or unsigned as of the closing of the vacancy will not be considered in the selection process
- The Town of West Yellowstone is an EEO/ADA employer. Women, minorities, and persons with disabilities are encouraged to apply.
- The Town of West Yellowstone has enacted a Drug and Alcohol-Free Workplace testing policy. This policy includes pre-employment and for-cause drug and alcohol testing. A copy of this policy is available to the general public for review.
- Applicants are encouraged to read the full position description for other responsibilities and essential functions. This a regular, full-time position. Positions are contingent upon annual budgetary consideration by the Town Council.

Application Procedure

Please provide the following:

1. A cover letter addressing qualifications for the position.
2. A completed and signed Town of West Yellowstone application (www.townofwestyellowstone.com).
3. A current resume.

Submit to:

Town of West Yellowstone
440 Yellowstone Avenue
PO Box 1570
West Yellowstone MT 59758



Town of West Yellowstone, Montana

Position Title	Public Services Seasonal Laborer
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General Statement of Duties

Perform routine maintenance of parks, public facilities, and grounds, including right-of-ways, streets, and sidewalks. Performs directly related work as required.

Distinguishing Features of the Position

The principal function is to perform general labor duties including operation of vehicles and equipment, watering and mowing of grass, painting, installing signs, and collecting trash. The work is performed under the supervision and direction of the Public Services Superintendent and Deputy Superintendent, but some leeway may be granted for the exercise of independent judgement and initiative. The nature of the work performed requires the employee establish and maintain effective working relationships with supervisors, other Town employees, property owners, and the general public. The principal duties are performed in both indoor and outdoor environments in all weather conditions.

Examples of Essential Work (Illustrative Only)

- Safely operate and maintain hand tools, power tools, and light equipment to maintain Town parks, public facilities, cemetery, streets and sidewalks, and Town-owned buildings and equipment;
- Perform manual labor and assist in construction and maintenance projects associated with parks, public buildings, streets, and sidewalks.
- Perform routine maintenance, preventive maintenance, and minor repair on equipment including motorized trimmers, sprayers, and mowers;
- Maintain public restrooms and empty trash from public dumpsters;
- May assist with snow removal as necessary;
- Performs all other duties as assigned by the Public Services Superintendent, Deputy Superintendent or Town Manager.

Required Knowledge, Skills, and Abilities

- Knowledge of best safety practices and procedures as applied to Public Services operations;
- Knowledge of related work equipment used in the Public Services Department;
- Establish and maintain effective working relationships with Department Heads, other Town employees, property owners, and the general public;
- Follow all policies and operating procedures; show respect, tact, and courtesy in dealing with coworkers and the general public; behave in a manner that does not obstruct or hinder other employees from completing their duties; act in a manner that is safe and follow the Town's safety procedures at all times;
- Communicate effectively with others, both orally and in writing, using both technical and non-technical language;
- Understand oral and written policies, procedures, and instructions;
- Perform a wide variety of duties and responsibilities with accuracy and speed under the pressure of time-sensitive deadlines;
- Flexibility to work nights, weekends, holidays, overtime, and be subject to short-notice "call in" shifts as required;
- Integrity, ingenuity, and inventiveness in the performance of assigned tasks.

Acceptable Experience and Training

- High School Diploma or equivalent preferred, AND;
- At least 1 year of experience in a related public services, maintenance, or construction position, preferably in the public sector;
- OR any combination of experience and training which provides the equivalent scope of knowledge, skills, and abilities necessary to perform the work.

Required Special Qualifications

- Must be 16 years of age or older
- Valid driver's license (Must have a valid Montana driver's license within fifteen (15) days of employment);
- May require other appropriate licenses or certifications;
- Offers for employment are conditional upon satisfactory response to appropriate post conditional offer process;
- Pre-employment and periodic random alcohol & drug screening is required.

Essential Physical Abilities

- Clarity of speech and hearing or other communication capabilities, with or without reasonable accommodation, to permit the employee to communicate effectively;
- Vision or other powers of observation, with or without reasonable accommodation, to enable the employee to efficiently operate Town vehicles, tools, and equipment in the maintenance and repair of Town property;

- Manual dexterity, with or without reasonable accommodation, to enable the employee to efficiently operate Town vehicles, hand and power tools, and other related equipment as required;
- Personal mobility and physical reflexes, with or without reasonable accommodation, to enable the employee to easily access a variety of land sites throughout the Town, climb stairways, ladders, or work on elevated platforms, traverse uneven surfaces, work outdoors in inclement weather, lift and carry heavy (50 pounds) objects.

Acknowledgement

By signing this statement, I, the employee, acknowledge my respective job description has been received and that I have read this document and understand what is expected from me as a Seasonal Laborer for the Town of West Yellowstone, MT.

Signed: _____

Date: _____

Print Name: _____

Position: _____ Seasonal Laborer

Effective Date of Employment: _____

Attest:

Supervisor: _____

Date: _____



EMPLOYMENT APPLICATION

TOWN OF WEST YELLOWSTONE, MT

P.O. BOX 1570

West Yellowstone, MT 59758

info@townofwestyellowstone.com

Notice To Applicants

We welcome you as an applicant for employment. It is the policy of the Town of West Yellowstone to consider applicants for all positions without regard to race, ancestry, color, religion, creed, sex, national origin, age, marital status, political beliefs, veteran/military, genetic information, sexual preference, or the presence of a non-job related medical condition or physical/mental disability or any other legally protected status unless related to a bona fide occupational requirement. A separate application, resume and other supporting documentation must be submitted for each job vacancy as required by the job posting.

POSITION APPLIED FOR: _____

DEPT: _____ DATE: _____

PERSONAL INFORMATION

Last Name: _____ First: _____ Middle: _____

PRESENT ADDRESS: _____

City: _____ State: _____ Zip: _____

Contact Phone: _____ Email Address: _____

List other names, if any, used on employment or education records: _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

☐ No Yes If yes, please explain: _____

Are you 18 years or older? ☐ No Yes

Please provide the earliest date that
you are available for work? _____

Have you ever been convicted of a felony? ☐ Yes ☐ No If yes, describe in full – give dates: _____

[Criminal convictions are not an absolute bar to employment, but will be considered in relation to specific job requirements]

Have you ever worked for or are you currently working for the Town of West Yellowstone?

If yes, please give dates: From: _____ To: _____

Department: _____ Prior position: _____

Reason for leaving: _____

Do you have any relatives working for the Town? ☐ Yes ☐ No

If yes, please give their name(s): _____

EDUCATION

High School:

Name: _____ Address: _____

Did you graduate? ☐ Yes ☐ No

Diploma or GED: _____

College:

Name: _____ Address: _____

Course of Study: _____ Last year completed: _____

Did you graduate? _____

List Diploma or Degree: _____

Other (specify):

Name: _____ Address: _____

Course of Study: _____ Last year completed: _____

Did you graduate? _____

List Diploma or Degree: _____

SPECIAL SKILLS

Special Skills Relating to The Position You Are Applying For: (clerical skills, heavy equipment operating skills, etc.):

DRIVER LICENSES

Do you have a valid Driver's License? ☐ Yes ☐ No State: _____

Number: (optional) _____ Expiration Date: _____

Do you have a Commercial Driver's License? _____ If yes, specify: Type: _____

Class: _____ Tank: _____

Endorsements: Hazardous Material: _____ Passenger: _____

Airbrakes: _____ Other (specify): _____

OTHER LICENSES or CERTIFICATES (CPA, Water Treatment, Boiler Operator, etc.)

Name of Licensing Agency: _____ Address: _____

Type of License: _____	Endorsement/Restriction (if applicable): _____
Date Licensed: _____	Date Expires: _____
Name of Licensing Agency: _____	Address: _____
Type of License: _____	Endorsement/Restriction (if applicable): _____
Date Licensed: _____	Date Expires: _____
Name of Licensing Agency: _____	Address: _____
Type of License: _____	Endorsement/Restriction (if applicable): _____
Date Licensed: _____	Date Expires: _____

EMPLOYMENT HISTORY

Instructions: Begin with your present or most recent job and list your work experience with emphasis on experience that is relevant to the position for which you are applying. Include military service and any volunteer work which has provided experience that would help you qualify. If the space below is not adequate, you may respond to this section on a separate sheet of paper. **This information must be completed even if a resume is submitted.**

NOTICE TO APPLICANTS: Information that you provide on this application is subject to verification. Previous employers may be contacted as references and for verification.

May we contact your current employer? ☐ Yes ☐ No

CURRENT EMPLOYER: _____ Address: _____

Date Employed: _____

From: _____ To: _____

Position: _____ Salary: _____

Contact: _____ Phone: _____

Describe work performed: _____

Reason for leaving: _____

EMPLOYMENT HISTORY

PAST EMPLOYER: _____ Address: _____

Date Employed:

From: _____ To: _____

Position: _____ Salary: _____

Contact: _____ Phone: _____

Describe work performed: _____

Reason for leaving: _____

PAST EMPLOYER: _____ Address: _____

Date Employed:

From: _____ To: _____

Position: _____ Salary: _____

Contact: _____ Phone: _____

Describe work performed: _____

Reason for leaving: _____

PAST EMPLOYER: _____ Address: _____

Date Employed:

From: _____ To: _____

Position: _____ Salary: _____

Contact: _____ Phone: _____

Describe work performed: _____

Reason for leaving: _____

REFERENCES

List three (3) references, excluding relatives, who have knowledge of your ability to perform this job:

Full Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

Full Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

Full Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

AUTHORIZATION TO RELEASE INFORMATION

1. As an applicant for a position with the Town of West Yellowstone, I am required to furnish information which this agency may use in determining my qualifications. I hereby expressly authorize release of any and all information which you, as a previous employer or employment reference, may have concerning me, including information of a confidential or privileged nature. I hereby release any organization, company, institution or person furnishing the information requested. I authorize the use of duplicated copies of this document to serve as the original.
2. I acknowledge that I may have to submit to a drug and alcohol test prior to employment if required by the Town of West Yellowstone Drug-Free Workplace and Pre-Employment Drug Testing Policy. I further acknowledge that a negative drug test result and remaining drug free are conditions of my employment.
3. For the purpose of in-house security, I consent to a background and security investigation prior to employment.
4. I certify that the foregoing answers, and all supplemental documents are correct and that false information may disqualify me from employment with the Town of West Yellowstone, and may result in dismissal if employed. I understand that employment may be contingent upon satisfactory completion of a physical examination showing that I can adequately perform job-related functions. If employed by the Town of West Yellowstone, I will abide by the Town's Policies, Practices, and Procedures.

I have read and agree with the above statements. If applying on-line, I authorize electronic submission of this document to serve as the original.

Signature: _____ **Date:** _____

EMPLOYMENT PREFERENCE ACTS

Name: _____

Position Applied For: _____

Department: _____

If you are claiming preference under the **Veterans' Public Employment Preference Act** or the **Persons with Disabilities Public Employment Preference Act**, complete the following. The appropriate documentation must be attached to claim employee preference. Veteran's Employment preference provides the addition of 5 percentage points or 10 percentage points to the applicant's score when a numerically scored selection procedure is used. Contact your local Job Service for details on veterans' preference. Contact your local Montana Vocational Rehabilitation Services Office, Department of Public Health and Human Services (PHHS) for details on obtaining persons with disabilities preference certification.

If you claim Preference, **documentation must be attached**. Please check which attachments you have included:

☐ DD-214 ☐ PHHS Disability Certificate ☐ Other

To claim **Veterans' Employment Preference**, you must be a U.S. Citizen and (check ONE of the boxes below):

- ☐ **A Veteran, if**
1. You have been separated under honorable conditions, **AND** have served more than 180 consecutive days of active federal military duty other than for training in the Army, Air Force, Navy, Marines, or Coast Guard or were a member of the reserves who served on federal military duty during a period of war or in a campaign or expedition for which a campaign badge is authorized.
 2. You are or have been a member of the Montana Army or Air National Guard who has satisfactorily completed a minimum of 6 years' service in armed forces, the last 3 of which have been served in the Montana Army or Air National Guard.

- ☐ **A Disabled Veteran, if**
1. You have been separated under honorable conditions from military duty, **AND**
 2. You have an established Armed Forces service-connected disability **OR** are receiving compensation, disability retirement benefits, or pension from the U.S. Department of Veterans Affairs or military department, **OR** you have received a Purple Heart.

☐ **The spouse of a disabled veteran** if the veteran's disability prevents him/her from working.

☐ **The un-remarried surviving spouse of a veteran or disabled veteran.**

- ☐ **A Mother of a Veteran, if**
1. THE VETERAN died under honorable conditions while serving in the Armed Forces, OR THE VETERAN has a service-connected, permanent, and total disability, **AND**
 2. YOUR SPOUSE is totally and permanently disabled, **OR** YOU are the un-remarried widow of the father of the veteran.

To claim **Montana Persons with Disabilities Employment Preference** you must be (check ONE of the boxes below):

- ☐ **A person with a disability** certified by PHHS, **OR**
- ☐ The **spouse** of a totally (100%) disabled person certified by PHHS **AND have** resided continuously in Montana for at least 1 year immediately before applying for employment

SIGNATURE (typed): _____

DATE SIGNED: _____

APPLICANT SURVEY

Title VII of the U.S. Civil Rights Act requires the State of Montana to “make and keep records relevant to the determinations of whether unlawful employment practices have been or are being committed.” This is also a requirement of the Montana Human Rights Act and state and federal laws providing employment opportunities for veterans and persons with disabilities. The following survey helps to fulfill these requirements.

This applicant survey will be separated from your application. The Town of West Yellowstone is subject to certain governmental record keeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the employer invites applicants to voluntarily self-identify their race and ethnicity. Submission of this information is voluntary. Refusal to provide it will not subject you to any adverse treatment. The information will be kept confidential and will be used only in accordance with the provisions of applicable laws, executive orders and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual

Position Closing Date: _____

☐

Male

☐

Female

Are you 18 years or older? ☐ Yes ☐ No

Name: _____

Job Applied For: _____

Department: _____

HOW DID YOU FIRST LEARN OF THIS POSITION?

☐

Newspaper ad or journal ad

☐

Telephone Job Line

☐

Job Service

☐

Career / Job Fair

☐

Female, minority or handicapped referral organization

☐

A friend / employee

☐

Posted in Town Hall

☐

Town of West Yellowstone Website

☐

Other (specify) _____

RACE / ETHNICITY – Please check the **ONE** box that best describes your race/ethnicity:

- ☐ **Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origins regardless of race.
- ☐ **White (not Hispanic or Latino)** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- ☐ **Black or African American (Not Hispanic or Latino)** – A person having origins in any of the black racial groups of Africa.
- ☐ **Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- ☐ **Asian (Not Hispanic or Latino)** – A person 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 Philippine Island, Thailand and Vietnam.
- ☐ **American Indian or Alaska Native (Not Hispanic or Latino)** – A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment.
- ☐ **Two or More Races (Not Hispanic or Latino)** – All persons who identify with more than one of the above five races.

MILITARY STATUS – Please check the **ONE** box that best describes your military status.

- ☐ No Military Service
- ☐ Inactive Reserve
- ☐ Vietnam Veteran
- ☐ Active Reserve
- ☐ Retired
- ☐ Other Veteran
- ☐ DISABLED VETERN

DISABILITY STATUS

- ☐ DISABLED PERSONS' EMPLOYMENT PREFERENCE