

CITY OF TEMPE

Part-Time Employment Opportunity



Community Services Department · Arts & Culture Division · 700 W. Rio Salado Parkway · 480-350-2883
www.tempecenterforthearts.com

TCA Bartender (City of Tempe – Arts and Culture Division)

Closing Date: Open until position is filled
Hourly Wage: \$13.50-14.00 per hour
Work Schedule: Maximum 19.5 hours per week; weekend/evening availability is required

This is a non-benefitted position.

The TCA Bartender is professional, high-energy and possesses excellent communication skills to prepare and serve cocktails and concessions at Tempe Center for the Arts. Duties include greeting customers, answering questions, recommending menu items, preparing beverages, serving food, and handling cash/credit transactions.

Education and/or Experience: Requires familiarity with food industry best practices, prior bartending experience is preferred. High school diploma/GED required. Arizona Title 4 Alcohol Certification required. Maricopa County Food Handlers Certification required.

Essential Job Functions:

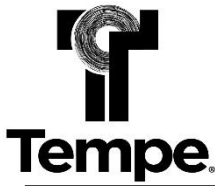
- Maintains a guest focus while performing duties. Actively engage with customers to determine beverage preferences, make recommendations, and take beverage orders.
- Is responsible for quality of products served while on duty. Prepares a variety of drink items by selecting and mixing ingredients and adding garnishes. Stocks and maintains sufficient levels of bar products to ensure smooth service. Adheres to all Arizona State Liquor Laws.
- Completes opening checklists at start of each shift. Handles cash and credit card transactions, ensures charges are accurate and return correct change to patrons. Maintains an accurate cash drawer.
- Properly handles, stores, labels, and rotates all products in accordance with applicable laws. Adheres to all food safety regulations. Promptly reports equipment and food quality or shortage problems to F&B Coordinator.
- Maintains a clean and sanitary work area and dining area by removing trash, cleaning tables and washing utensils and equipment.
- Attends all scheduled employee meetings and brings suggestions for improvement.
- Must be able to: communicate clearly and effectively; use basic math and operate a computer; coordinate with other facility staff to ensure successful events; reach, bend, stoop and occasionally lift 25 pounds; work in a standing position for up to seven hours; work in a fast-paced environment; follow directions and ask questions for clarification when needed; demonstrate effective organizational skills and initiative.
- Performs other related duties as assigned by the F&B Coordinator or manager-on-duty.

Applicant Requirement: Requires successful completion of selection process, completion of background investigation and verification of identity/work authorization. Requires verification of meeting Arizona's minimum age to serve alcohol.

Note: City of Tempe employees cannot accept gratuities.

Email Resume and Application to: sally_garrison@tempe.gov
For questions, please contact: Sally Garrison at 480-350-2883

An equal opportunity/reasonable accommodation employer



Temporary Employment Application

Community Services | Arts & Culture Division | www.tempe.gov/ARTS

Last Name:		First Name:		MI:
Street Address:			City, State, Zip	
Phone Number:		E-Mail Address:		

Position(s) applying for _____

Do you possess a valid Driver's License (may be required for certain positions)? Yes No

Your age group is? 15-17 years 18-20 years 21 years+

Are you a U.S. Citizen or a non-U.S. Citizen authorized to work in the United States? Yes No

Have you ever worked for the City of Tempe? Yes No

If yes, from _____ (mm/yy) to _____ (mm/yy)

Are you related to any member of the Tempe City Council or any Tempe Commission/Board Member, or any City of Tempe employee? Yes No If yes, please indicate his/her name, position, and relationship to you:

To assist us with verifying previous work experience and /or education, please list other names you have gone by:

Are you a veteran? Yes No

NOTE: If you are claiming Civil Service Preference for Veterans under ARS 38-492, you must submit a copy of your DD214 (Member-2 or 4) at the time you are invited to a testing process.

Dates available: From _____ To _____

Please specify times you are available to work on the chart below.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Have you obtained a high school diploma or a high school equivalent certification? Yes No

If no, please indicate your highest grade level completed _____

Education from an accredited College/University:

College:	Major:	Type of Degree:	Degree Completed:
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

Trade and/or Technical Schools:

Trade/Technical School:	Subject Studied:	Type of Degree:	Degree Completed:
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

Certification or Registration (CPR, First Aid, Adv. Lifesaving, Lifeguard Training, W.S.I etc.)

Type of Professional Registration, License, and/or Certification:	License Number (if applicable):	Date Received:	Expiration Date (if applicable):

Special training *that relates to this position*:

List computer software program(s) with which you are proficient in operating *that relate to this position*:

Language Proficiency (other than English):

Language:	Speak:	Read:	Write:
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Begin with your present or most recent position. List all jobs, paid or volunteer, for at least the past ten years. Your qualifications will be evaluated **solely** on the application form and, if applicable, any supplemental questionnaire(s).

DO NOT WRITE "SEE RESUME" IN THE SPACES BELOW.

Place of Employment or Volunteer Experience:

Address:

Phone:

Job Title:

Employees Supervised:

Supervisor (Name/Title/Phone):

Employment Dates (mm/yy):

Hours Per Week:

Wage: \$ per

Work Performed:

Reason for Leaving:

Place of Employment or Volunteer Experience:

Address:

Phone:

Job Title:

Employees Supervised:

Supervisor (Name/Title/Phone):

Employment Dates (mm/yy):

Hours per Week:

Wage: \$ per

Work Performed:

Reason for Leaving:

Place of Employment or Volunteer Experience:

Address:

Phone:

Job Title:

Employees Supervised:

Supervisor (Name/Title/Phone):

Employment Dates (mm/yy):

Hours Per Week:

Wage: \$ per

Work Performed:

Reason for Leaving:

Place of Employment or Volunteer Experience:		
Address:	Phone:	
Job Title:	Employees Supervised:	
Supervisor (Name/Title/Phone):		
Employment Dates (mm/yy):		
Hours Per Week:	Wage: \$	per
Work Performed:		
Reason for Leaving:		

Have you ever been requested or forced to resign from a position for misconduct or unsatisfactory service?

Yes No *If Yes, please explain:*

PLEASE READ THIS STATEMENT AND CAREFULLY REVIEW YOUR ENTIRE APPLICATION MATERIAL BEFORE SIGNING BELOW.		
<p>I certify that all statements made on the application form and, if applicable, any supplemental questionnaire(s) are true and complete. I understand that any omission, misstatement, or falsification may be cause for rejection of this application, removal of my name from an eligibility list(s), and/or discharge from City Service. In addition, I authorize any individual, company, organization, or institution to release any and all information concerning statements made by me on this application, and I do hereby release all parties and individuals connected therewith from all liabilities for any damages whatsoever incurred in furnishing such information.</p>		
Print Applicant's Name	Applicant Signature	Date

<u>FOR ADMINISTRATIVE USE ONLY</u>	
Job Code: _____	Cost Center: _____
Title: _____	Hourly Wage: _____
Supervisor: _____	Weekly Hours: _____