



City of Canfield

104 LISBON STREET
CANFIELD, OHIO 44406-1416

Phone: 330-533-1101
Admin. Fax: 330-533-4415
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www.ci.canfield.oh.us



JOB OPPORTUNITY

PUBLIC WORKS SUMMER SEASONAL LABORER

Current Salary: 15/hr.

Following is a brief overview of the position. Please review the entire job description (attached) for a complete listing of the essential duties, responsibilities, physical demands and working environment, minimum qualifications, and other requirements of this position.

Required:

Must be at least 17 years of age, Must have Valid Ohio driver's license, Clear diction and legible handwriting, Ability to deal with the public in calm, polite manner, Normal hearing and vision (corrected vision is acceptable), Prior to appointment, the applicant must pass a CVSA, background check and a physician must sign off on the job description.

How to Apply:

Application forms may be downloaded <https://canfield.gov/employment-opportunities/> or obtained at the City of Canfield Municipal Building, 104 Lisbon St., Canfield, Ohio 44406 between 8am and 4:30pm Monday through Friday. Notarized completed applications must be returned to the City of Canfield Municipal Building. The city will collect applications until the position(s) are filled. Qualified candidates will be notified if they are deemed eligible to participate in the hiring process. Questions can be referred to City Manager David D'Apolito or Public Works Superintendent John Rapp at 330-533-1101 or ddapolito@canfield.gov and jrapp@canfield.gov.

The City of Canfield is an Equal Opportunity Employer and maintains a policy of Equal Employment Opportunity for all employees and applicants. The City of Canfield does not discriminate in employment or the provision of services on the basis of race, color, national origin and ancestry, gender (sex), religion, age, disability, sex (wages), military status, genetic information, pregnancy, or any other characteristic protected by Federal or State law.

Date Posted: 04/22/26



CLASSIFICATION SPECIFICATION

CITY OF CANFIELD (UPDATED 4/26)

AN EQUAL OPPORTUNITY EMPLOYER

Class Title: Public Works Seasonal Laborer

REQUIRED QUALIFICATIONS FOR APPOINTMENT

- Must be at least 17 years of age
- Must have High School diploma or G.E.D. certificate
- Valid Ohio driver's license
- Clear diction and legible handwriting
- Neat and Clean appearance
- Normal hearing and vision (corrected vision is acceptable).
- Upon filing an application and/or resume, applicant must pass a CVSA, background check, a drug screen and a physician must sign off on the job description.
- Other qualifications as deemed necessary by the city manager and/or Public Works Superintendent.

JOB DESCRIPTION

(FACTORS AND CONDITIONS WHICH ARE ESSENTIAL CHARACTERISTICS OF THE POSITION)

This position requires Monday – Friday availability, however the typical work week is approximately 24-32 hours depending on weather. Applicants must be at least 17 years old, with a valid driver's license.

MAJOR RESPONSIBILITIES & DUTIES

Seasonal laborer is tasked with assisting Public Works Crews in the seasonal groundskeeping activities of the City of Canfield. This includes but is not limited to; mowing, trimming, and general landscaping of City of Canfield Parks, Cemeteries, Village Green and other grounds, and any other task as assigned by the public works foreman, public works supervisor or city manager.

WORK CONDITIONS

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of the job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions. While performing the duties of the job, the employee is regularly required to stand; walk; sit; use hands to finger, handle or feel objects, tools or controls; lift and reach with hands and arms; climb or balance; and stoop, kneel, crouch, or crawl. The employee must frequently lift and/or move up to twenty-five (25) lbs. and occasionally lift and/or move up to one hundred (100) lbs. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and the ability to adjust focus. While performing the outdoor duties of this job, the public works laborer often works in varying outside weather conditions and will be exposed to wet, humid, frigid or hot temperatures; may be subjected to airborne particles and extremely noisy environments. The employee may also need to inspect or work in elevated or sub-terrain locations, while using heavy or unwieldy equipment.

CITY OF CANFIELD APPLICATION

Updated: 7/12/24

Application for Employment		Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of any non-job-related medical condition or handicap.	
Application Date:		Referred by:	
Positions(s) Applied For: (you may check more than one)	<input type="checkbox"/> City Position _____	<input type="checkbox"/> Full Time Dispatcher	
	<input type="checkbox"/> Full Time Police Officer	<input type="checkbox"/> Part Time Dispatcher	
	<input type="checkbox"/> Part Time Police Officer	<input type="checkbox"/> Other (write in title)	_____
	<input type="checkbox"/> Auxiliary Police Officer		
Personal Information	Social Security #: ____-____-____	Do you have a valid drivers license? <input type="checkbox"/> Yes <input type="checkbox"/> No.	
	U.S. Citizen <input type="checkbox"/> yes <input type="checkbox"/> no	Drivers License: State: _____ Number: _____	
NAME (Last, First, Middle)		Area Code & Phone Number	
CURRENT ADDRESS (Street, Apt, City, State, Zip Code)		Length of Time at Address	
PREVIOUS ADDRESS (Street, Apt, City, State, Zip Code)		Length of Time at Address	
Cell. Phone Number:	E Mail Address:	Other Number:	
Education High School	SCHOOL NAME: FULL ADDRESS:		<input type="checkbox"/> Diploma Received <input type="checkbox"/> G.E.D. Received
			Date Received:
GPA	Course of Study	Awards/Honors/Offices	Extracurricular Activities
Attendance Record		Favorite Class	
Education Undergraduate	SCHOOL NAME: FULL ADDRESS:		<input type="checkbox"/> Associate Degree <input type="checkbox"/> Bachelors Degree
			Date Received:
GPA	Major / Minor	Awards/Honors/Offices	Extracurricular Activities
Why was this school chosen?			
Attendance Record		Favorite Class	
Education Graduate	SCHOOL NAME: FULL ADDRESS:		<input type="checkbox"/> Masters Degree
			Date Received:
GPA	Major / Minor	Awards/Honors/Offices	Extracurricular Activities
Why was this school chosen?			
Attendance Record		Favorite Class	
Education Other/Academy	SCHOOL NAME: FULL ADDRESS:		<input type="checkbox"/> Completion
			Date Received:
GPA	Course of Study	Awards/Honors/Offices	Extracurricular Activities
Why was this school chosen?			
Attendance Record		Favorite Class	
Military Information	Branch	From:	To
	Highest Rank or Grade	Terminal Rank or Grade	Type of Discharge
Nature of Duties:			
Awards/Honors:			

Employment Information		List ALL current and previous employment starting with your present position, then the position before that, and so forth. Use additional forms if needed.	
#1: From:	To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Bus. Phone:	
Responsibilities: What did you like most about your job? What did you least enjoy? Reasons for leaving: Compensation: Attendance Record: Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No Signature:			
#2: From:	To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Bus. Phone:	
Responsibilities: What did you like most about your job? What did you least enjoy? Reasons for leaving: Compensation: Attendance Record: Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No Signature:			
#3: From:	To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Bus. Phone:	
Responsibilities: What did you like most about your job? What did you least enjoy? Reasons for leaving: Compensation: Attendance Record: Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No Signature:			

#4: From: To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)		Immediate Supervisor
Other Supervisor:	Other Supervisor:	Bus. Phone:
Responsibilities: What did you like most about your job? What did you least enjoy? Reasons for leaving: Compensation: Attendance Record: Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No Signature:		
#5: From: To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)		Immediate Supervisor
Other Supervisor:	Other Supervisor:	Bus. Phone:
Responsibilities: What did you like most about your job? What did you least enjoy? Reasons for leaving: Compensation: Attendance Record: Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No Signature:		
#6: From: To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)		Immediate Supervisor
Other Supervisor:	Other Supervisor:	Bus. Phone:
Responsibilities: What did you like most about your job? What did you least enjoy? Reasons for leaving: Compensation: Attendance Record: Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No Signature:		

#7: From:	To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Bus. Phone:	
Responsibilities: What did you like most about your job? What did you least enjoy? Reasons for leaving: Compensation: Attendance Record: Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No Signature:			

#8: From:	To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Bus. Phone:	
Responsibilities: What did you like most about your job? What did you least enjoy? Reasons for leaving: Compensation: Attendance Record: Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No Signature:			

<p>Other Employment? <input type="checkbox"/> Yes <input type="checkbox"/> No. If “Yes,” please list all other employment on a separate sheet of paper and attach to this form. Applicant hereby certifies that all employment is hereby accounted for on this application, and further understands that failure to disclose any previous employment is grounds for termination in the event that applicant is hired with this agency.</p> <p>Signature:</p>
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Job Related Questions / Plans / Goals	Applicant's Name: (print)
List any relevant certifications you have attained:	
What special skills, experiences or qualifications, related to the position(s) applied for, do you possess?	
List all job applications you currently have filed. Note status of employment opportunities for each application:	
What are your available hours and days to train and work at this agency?	
What are your long-term goals for employment?	
<p>Do you have any prior Domestic Violence arrests and/or convictions? <input type="checkbox"/> Yes <input type="checkbox"/> No. If "Yes," please explain.</p> <p>Applicant hereby certifies that ALL criminal history (regardless of convictions) is hereby accounted for on this application, and further understands that failure to disclose any previous or pending criminal history is grounds for termination in the event that applicant is hired with this agency. Applicant hereby grants permission to the Canfield P.D. to conduct a criminal record check through all available sources.</p> <p style="text-align: center;">Signature:</p>	
<p>Do you have any driving record? <input type="checkbox"/> Yes <input type="checkbox"/> No. If "Yes," please explain.</p> <p>Do you have any prior Driving Under the Influence arrests and/or convictions? <input type="checkbox"/> Yes <input type="checkbox"/> No. If "Yes," please explain.</p> <p>Applicant hereby certifies that ALL driving record history within the past fifteen years is hereby accounted for on this application, and further understands that failure to disclose any previous or pending driving record is grounds for termination in the event that applicant is hired with this agency. Applicant hereby grants permission to the Canfield P.D. to conduct a license records check through all available sources.</p> <p style="text-align: center;">Signature:</p>	
<p>Are you computer literate? <input type="checkbox"/> Yes <input type="checkbox"/> No. What programs are you familiar with? And to what extent?</p> <p>Can you type? <input type="checkbox"/> Yes <input type="checkbox"/> No.</p>	
<p>I hereby authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal and/or termination from the civil service list.</p> <p>Date: _____ Signature: _____</p>	

Applicant may attach a current resume and copies of applicable certifications with this application.

For and in consideration of the City of Canfield's acceptance and processing of my application for employment, I agree to hold your organization, its agents and employees harmless from any and all claims and liability associated with my application for employment or in any way connected with the decision whether or not to employ me with the City of Canfield. I understand my rights under Title 5, United States Code, section 552a, the Privacy Act of 1974 and related Ohio Revised Code sections, with regard to access and to disclosure of records, and I waive those rights with the understanding that the information furnished will be used by the Canfield Police Department in conjunction with employment procedures.

A photocopy or FAX copy of this release form will be valid as an original thereof, even though the said photocopy or FAX copy does not contain an original writing of my signature.

This waiver is valid upon my signature during the time associated with the selection process of the City of Canfield.

I agree to indemnify and hold harmless the person to whom this request and his agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees arising out of or by reason of complying with this request.

The following information must be completed in the presence of a certified Notary Public:

_____, having been duly sworn under oath states that this is his/her
Name of Applicant/ Affiant

lawful affidavit and request for release of records.

Signature of Applicant

Sworn and subscribed before me, a Notary Public this _____ day of _____, 20_____.

SEAL MUST BE AFFIXED

Signature of Notary Public

Printed Name of Notary

Printed Address of Notary

(Out of state notary must submit Certificate)