

JUKO Food Service Administrator

Job Description

Job Title: JUKO Food Service Administrator

Reports to: Wellness Coordinator

Summary

Just Us Kids Outdoors (Just Us Kids Outdoors) and Lil' JUKO are seeking a qualified candidate to fill the position of Food Service Administrator to run the summer camp lunch program.

JUKO is a free six-week long summer day camp serving many at-risk kids, offered by Richmond Parks and Recreation Department for kids entering first through sixth grades. Lil' JUKO is a free preschool day camp for children ages 3-5. Both camps include games, crafts, and many other fun activities. These camps serve free breakfast and lunch to our AM campers, and a free lunch provided by Richmond Community Schools, and paid for by the Summer Food Service Program to our PM campers.

Job Functions

Responsibilities include:

- Planning and operation of the food program, including overseeing distribution and stock levels of meals at camp sites.
- Tracking number of breakfast meals passed out daily to children (morning camps only) and number of lunches passed out daily to children.
- Handling administration and paperwork, which may include preparing and presenting reports.
- Keeping statistical records and assess how to improve the program for the following year.
- Abiding by the requirements set forth by the Summer Food Service Program.
- Reporting to Wellness Coordinator and Summer Food Service Program.
- Supervising children in the camps to ensure safety of all participants.
- Following the policies and procedures set for by the City of Richmond and the Richmond Parks and Recreation Department.
- Attend a training session prior to the start of JUKO, May 23 - May 30, with the exception of Memorial Day.
- Follow discipline guidelines established in the staff manual.
- Keep sites, pool, and any areas we visit clean and free of trash.
- Ability to handle confidential data with professional discretion.

Relationships

This job requires communication with Camp Directors, Site Leaders, and other Counselors regarding any concerns with the camps or meal-related issues. It also requires meetings with the Summer Food Service Program, the program that provides the funding for our free lunches.

Other Job Duties

This job may include work in other areas of the Parks Department or perhaps work related to the broader vision of JUKO, the free lunch program, and other duties as assigned.

Job Qualifications

- *Preferred:* College student majoring in Nutrition, Business, Administration, or related major
- Previous experience working with children.
- Ability to work with children of all ages.
- Strong supervisory and management skills.
- Ability to become CPR and First Aid Certified.
- Knowledge of Microsoft Word, Excel, and PowerPoint.
- Excellent interpersonal, verbal, and written communications skills.
- Must be able to work all days of camp and the week of training (May 23 – August 2, exception of Memorial Day and Fourth of July).

Physical Requirements

This position would require the ability to listen to others, observe others actions, read text and information, and comprehend instruction. It also demands the physical ability to move about the camp property in various environmental conditions, and carry coolers of milk/lunches up to 30 pounds.

***If you meet the requirements above, please fill out:
an application, background check, "JUKO Food Service Administrator Application" questions,
and send resume to:***

Mail resume and application to: **OR**
Marshall Ma
Richmond Parks and Recreation Department
50 North 5th Street
Richmond, IN 47374

Pick up/drop off an application at:
Park Administration Office
Glen Miller Park
2200 East Main St
Richmond, IN 47374

Questions? Contact Marshall Ma, Wellness Coordinator
Office Phone: (765) 983-7425
Email: marshall@richmondindiana.gov

JUKO Food Service Administrator Application Questions

1. Please list details on your college degree or what you are currently majoring in at school:

2. Why are you applying to work as JUKO's Food Service Administrator: _____

3. How has your past experiences prepared you for this job with JUKO: _____

4. What makes you a good candidate for a position with JUKO: _____

5. Email address: _____

6. In order to work for JUKO, you must be committed from May 23 – July 11 (exception of Memorial Day and Fourth of July). Is there any reason you would need to miss work *on any day*?

Please circle: Yes No

If Yes, please explain:



CITY OF RICHMOND
50 North 5th Street
Richmond, Indiana 47374

**EQUAL OPPORTUNITY EMPLOYER
APPLICATION FOR EMPLOYMENT**

Applications are considered for all positions without regard to sex, race, color, creed, age, disability, national origin, or ancestry.

Please print clearly – Applicant must complete the application

POSITION APPLYING FOR _____ DATE _____

Personal Information

Name: _____ SSN# _____
Last First Middle

Address: _____ Phone: () _____

City: _____ State: _____ Zip: _____

In an emergency contact _____ Phone: () _____

Address: _____ City: _____ State/Zip: _____

If you are under 18 years of age, can you furnish a work permit? Yes _____ No _____

Are you presently employed? Yes _____ No _____

May we contact your present employer? Yes _____ No _____

When would you be available for work? _____ PartTime _____ FullTime _____

Are you available for any work shift or weekends? Yes _____ No _____

Have you applied for a position with the City previously? Yes _____ No _____

Do you have a CDL license? Yes _____ No _____

Employment History

Start with your present employer and work down. All work experience should be listed. Attach an additional sheet if necessary.

Name of Employer: _____ Address: _____

Phone: () _____ Position: _____ Supervisor: _____

Date employed

Date of Separation

Salary

Month Day Year

Month Day Year

Describe your duties and responsibilities: _____

Name of Employer: _____ Address: _____

Phone: () _____ Position: _____ Supervisor: _____

Date employed

Date of Separation

Salary

Month Day Year

Month Day Year

Describe your duties and responsibilities: _____

Name of Employer: _____ Address: _____

Phone: () _____ Position: _____ Supervisor: _____

Date employed

Date of Separation

Salary

Month Day Year

Month Day Year

Describe your duties and responsibilities: _____

Education

School	Name and Location	Graduate	Degree or Certificate
High School	_____	Yes ___ No ___	_____
College/University	_____	Yes ___ No ___	_____
Apprenticeship or On the job training	_____	Yes ___ No ___	_____
Other	_____	Yes ___ No ___	_____

List any honors or awards received: _____

List any boards or organizations served: _____

Special Skills and Qualifications that may be beneficial to the position applying for:

References

Please do not list relatives or former employers.

Name: _____ Address: _____ Phone: () _____

Name: _____ Address: _____ Phone: () _____

Name: _____ Address: _____ Phone: () _____

I certify the answers given above are true and complete to the best of my knowledge. I authorize the investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand that false or misleading information given in this application or interview may result in discharge. I understand that I am required to abide by all Rules and Regulations of the City of Richmond.

I further authorize the Richmond Police Department to provide any information concerning my record and/or any arrests, or pending warrants that I may have.

Signature Date

MVR Worksheet:

- 1.) In connection with my application for employment, I understand that as directed by company policy, and consistent with the job described, you may be requesting information from public and private sources about my driving record.
- 2.) I acknowledge that a telephonic facsimile (FAX) or photographic copy shall be as valid as the original.
- 3.) I hereby authorize, without reservation, any law enforcement agency, institution, information service bureau or insurance agency company, and/or RMD/Patti Insurance & Financial Services or its agent, to furnish the information described in Section 1.

Law enforcement agencies and other entities for positive identification purposes when checking public records require the following information. It is confidential and will not be used for any other purposes.

**Please print your full name:* Last, First, M.I.

**Please print other names you have used:*

Home Address:

City:

State:

Zip:

** D.O.B.:*

**S.S. #:*

**Drivers License #:*

**License State:*

Signature:

Date:

** Information required in order to obtain and MVR.*

RICHMOND POLICE DEPARTMENT
CITY OF RICHMOND
RECORDS DIVISION

APPLICANT NAME: _____

PRESENT ADDRESS: _____

ALIAS AND/OR OTHER NAMES (MAIDEN, ETC.): _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

TODAY'S DATE: _____

I, _____, HEREBY GIVE AUTHORIZATION TO THE RICHMOND, INDIANA POLICE DEPARTMENT TO PROVIDE ANY INFORMATION CONCERNING MY RECORD AND/OR ARRESTS; OR PENDING WARRANT THAT I MAY HAVE TO CITY OF RICHMOND.

APPLICANT'S SIGNATURE

DOES APPLICANT HAVE A RECORD? _____ YES _____ NO

RPD RECORD NUMBER _____

SEE ADDITIONAL _____ PAGES OF RECORD

COMMENTS:

RECORD'S CLERK SIGNATURE

INFORMATION CONCERNING THIS APPLICANT'S RECORD WAS DISTRIBUTED TO:

NAME: _____ DATE: _____

Please be advised, this is a local record check only.