



PETER FRANCISCO
SOIL AND WATER CONSERVATION DISTRICT
16842 W. JAMES ANDERSON HWY • BUCKINGHAM, VIRGINIA 23921
PHONE (434) 983-7923

SERVING BUCKINGHAM AND CUMBERLAND COUNTIES



Application Instructions for:
Part-time Agriculture Equipment Manager Position

Applications submitted by facsimile or other electronic means will not be accepted.

Submit your application packet directly to the Peter Francisco Soil and Water Conservation District office.
Position open until filled. Contact person for additional information:

Sherry Ragland, District Manager, (434) 983-7923.

Submit application packet to:

Peter Francisco SWCD
16842 W James Anderson Hwy
Buckingham, VA 23921

Required Documents to be Submitted by Applicants:

1. Cover letter
2. A DPT Form 10-012 Commonwealth of Virginia State Application for Employment
<http://jobs.virginia.gov/emplapplication.html>
3. Resume – to include written response explaining how you meet the following Knowledge, Skills and Abilities (KSAs) to include additional information not already submitted in your Virginia application.
 - a) *Ability to communicate effectively in English, using both written and oral forms of communication*
 - b) *Ability to develop and maintain effective working relationship with others*
 - c) *Ability to work independently and as a team member*
 - d) *Ability to work with the public and local public entities served by the District*
 - e) *Experience in an agricultural related field that demonstrates knowledge of large equipment or related*
4. College transcripts (if applicable)

Additional Information for Applicants:

1. Do not send position descriptions, manuscripts, personal endorsements, training certificates, publications, work samples or another unsolicited material, they will be discarded. References to these items may be made in your application or KSA response.
2. Application packet will not be returned to you.

A professional application gives a positive impression to the Board. It is recommended that you make every effort to assure your application is neat, legible, and error free.

Peter Francisco SWCD Job Description – Agriculture Equipment Manager, Part-time

Compensation: \$20/hour – average of 500 hours per year (seasonal)
No benefits
Non-exempt under the Fair Labor Standards Act.

Description of Work:

The Agriculture Equipment Manager coordinates the equipment (no-till drills) rental program for the Peter Francisco SWCD in both Buckingham and Cumberland counties. The equipment manager will: manage the scheduling/rental of two (2) no-till drills, and any other equipment; transport no-till drills/equipment to-and- from housing location to landowners and back. This position requires the employee to be able to work independently. The position receives direct guidance from the District Manager and/or the Sr. Conservation Specialist and administrative supervision from the Peter Francisco Soil and Water Conservation District (PFSWCD) Board of Directors. This position does not supervise other employees

Qualifications:

- High School Diploma and/or work experience in an agricultural related field that demonstrates knowledge of large equipment or related
- Must possess a valid Virginia driver's license in good standing with DMV
- Must pass Virginia State Police security background and drug check
- Ability to promote conservation program information offered by the district
- Knowledge of seeding recommendations
- Ability/knowledge to operate and transport rental equipment
- Ability to orally communicate to customers how to operate equipment and procedures
- Provide own tools to maintain and repair equipment; district tools are limited
- Physical ability to perform tasks involving frequent walking over difficult terrain, lifting and carrying moderate weight (50 lbs.), and exposure to adverse weather conditions
- Maintain a clean and neat appearance consistent with the public contact aspect of the position

Duties:

1. Ability to maintain, schedule and manage a calendar for rental of equipment
2. Prepare equipment contracts with landowner signature; including tax-exempt forms (as applicable)
3. A company vehicle and cell phone will be provided for customer delivery and communication
4. Instruct users on the equipment operation of the hydraulic systems; calibration of the equipment, according to seed being sown, and any minor maintenance needs as applicable
5. During equipment delivery (at the suggested speed of 35 mph), practice and follow the district's bio-security policy
6. Check the equipment before and after each use/rental, for any issues
7. Coordinate with Sr. Conservation Specialist repair needs during planting season and during winter maintenance
8. Assign repair and parts costs to appropriate piece of equipment. Contact the District Manager and/or Sr. Conservation Specialist for approval of the purchase of any parts over \$75 (receipts turned in weekly)
9. Submit all equipment contracts weekly to the District Manager to prepare customer invoices
10. Maintain a record of your hours worked, mileage traveled, and related expenses incurred to be turned in a minimum of once a month; weekly during busy seasonal period

Commonwealth of Virginia

Send this application directly to the agency announcing the vacancy.

An Equal Opportunity Employer

Application for Employment

Employees and applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, political affiliation, national origin, disability, marital status, gender or age.

As a means of accommodation to persons with specific disabilities that prevent them from completing this application, confidential assistance in filling out this application may be obtained by calling the agency to which you are applying.

1. Position applied for _____ 2. Agency _____

3. Social Security No.* _____
**Note: Completion of question three is optional. Failure to submit social security number on this form will not prohibit employment consideration. Social security number may be required on other forms prior to employment.*

4. Full legal name _____ 5. Phone _____

6. Address _____ 7. Email _____

8. EDUCATION

a. Check highest grade completed: 1st ___ 2nd ___ 3rd ___ 4th ___ 5th ___ 6th ___ 7th ___ 8th ___ 9th ___ 10th ___ 11th ___ 12th ___

b. If you did not complete high school, do you have a high school equivalency diploma? Yes ___ No ___

c. Check number of years of post-high school education completed: 1 ___ 2 ___ 3 ___ 4 ___ 5 ___ 6 ___ 7 ___ 8+ ___

d. Institution (Name & Location)	Degree or Certificate Received	Major or Specialty	Minor
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

e. If you expect to complete an educational program in the near future, please indicate what type of degree or program and expected completion date:

9. EXPERIENCE Use this section to highlight your knowledge, skills, and abilities which best demonstrate your qualifications for this position.

a. May we contact your present supervisor? NO ___ YES ___

b. Computer software experience – Please describe your computer and software proficiency using Microsoft Word, Excel, Outlook, PowerPoint, and Access; Quickbooks Pro; Adobe Acrobat Pro and any other relevant software you think may be useful. Be sure to specify the types of functions used and documents or products produced with each program.

Software	Functions Used	Documents or Products Created
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

c. Other qualifications: Use this space for any additional information you think would help us evaluate your application, including certifications, training, seminars, workshops, and special achievements or specialized skills

d. License (to include driver's), certificate or other authorization to practice a trade or profession.

Type	License Number	Granted By (licensing board)
_____	_____	_____
_____	_____	_____

Starting with the most recent, describe ALL paid, military, and applicable voluntary experience. You may list significantly different jobs within the same organization as separate items. highlight your knowledge, skills, and abilities which best demonstrate your qualifications for this position. Use Supplemental Experience Form(s) for additional space.

i. Job Title: _____ **Duties:** _____
 Employer: _____
 City & State: _____
 Ending Salary: _____ Hours/week: _____
 Dates (month/year): _____ to: _____
 # and title of employees you supervised: _____
 Equipment/Software used: _____
 Reason for leaving: _____

ii. Job Title: _____ **Duties:** _____
 Employer: _____
 City & State: _____
 Ending Salary: _____ Hours/week: _____
 Dates (month/year): _____ to: _____
 # and title of employees you supervised: _____
 Equipment/Software used: _____
 Reason for leaving: _____

iii. Job Title: _____ **Duties:** _____
 Employer: _____
 City & State: _____
 Ending Salary: _____ Hours/week: _____
 Dates (month/year): _____ to: _____
 # and title of employees you supervised: _____
 Equipment/Software used: _____
 Reason for leaving: _____

10. REFERENCES List names, addresses and relationships of three persons not related to you who know your qualifications.

Name	Title/Relationship	Address	Email	Telephone

11. MISCELLANEOUS

- a. Check which shift you will accept: DAY EVENING NIGHT ROTATING WEEKENDS SPECIFY SHIFT HOURS: _____
- b. Check which job status you would accept: FULL-TIME PART-TIME (SPECIFY) _____
- c. Check which employment status you'd accept: SALARIED (BENEFITS) HOURLY (NO BENEFITS) PART-TIME SALARIED (LEAVE BENEFITS ONLY)
- d. Are you willing to travel? NO YES
 If yes: DURING THE DAY ONLY OCCASIONALLY OVERNIGHT FREQUENTLY OVERNIGHT
- e. For purposes of compliance with The Immigration Reform and Control Act, are you legally eligible for employment in the United States? YES NO
- f. Under the Immigration Reform and Control Act of 1986, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. Further, you will be required to provide documentation to that effect should you be employed.
 Are you willing to provide your own transportation if necessary for your employment? YES NO
- g. Section 2.1-32.1 of the Code of Virginia prohibits any board, commission, department, agency, institution, or instrumentality of the Commonwealth from employing a person who is required to present himself and submit to the federal Selective Service registration requirement and failed to do so. If you are/were required to register for the Selective Service, have you done so? YES NO
 If no, state reason: _____
- h. For purposes of compliance with Section 2.1-112 of the Code of Virginia, check here if you are you a veteran who received an honorable discharge and served more than 180 consecutive days of full-time active duty in the US Army, Navy, Air Force, Marines, or reserve components thereof, including the National Guard.
 If so, did you serve during the Vietnam Conflict (2/28/61-3/7/75)? YES NO

12. When will you be available to start work? No date necessary if you are available as soon as you give two (2) weeks notice. MONTH: _____ DAY: _____ YEAR: _____

13. CERTIFICATION I hereby certify that all entries on both sides and attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part to any employment in the service of the Commonwealth of Virginia. I understand that all information on this application is subject to verification, and I consent to criminal history background checks. I also consent to references and former employers and educational institutions listed being contacted regarding this application. I further authorize the agency to rely upon and use, as it sees fit, any information received from such contacts. Information contained on this application may be disseminated to other agencies, nongovernmental organizations, or systems on a need-to-know basis for good cause shown as determined by the agency head or designee.

Date _____ Applicant Signature _____

SUPPLEMENTAL EXPERIENCE FORM

Name: _____

Position Applying For: _____

In reverse chronological order, continue to describe *ALL* paid, military, and applicable voluntary experience. You may list significantly different jobs within the same organization as separate items. highlight your knowledge, skills, and abilities which best demonstrate your qualifications for this position.

Job Title: _____ **Duties:** _____
Employer: _____
City & State: _____
Ending Salary: _____ Hours/week: _____
Dates (month/year): _____ to: _____
and title of employees you supervised: _____
Equipment/Software used: _____
Reason for leaving: _____

Job Title: _____ **Duties:** _____
Employer: _____
City & State: _____
Ending Salary: _____ Hours/week: _____
Dates (month/year): _____ to: _____
and title of employees you supervised: _____
Equipment/Software used: _____
Reason for leaving: _____

Job Title: _____ **Duties:** _____
Employer: _____
City & State: _____
Ending Salary: _____ Hours/week: _____
Dates (month/year): _____ to: _____
and title of employees you supervised: _____
Equipment/Software used: _____
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Job Title: _____ **Duties:** _____
Employer: _____
City & State: _____
Ending Salary: _____ Hours/week: _____
Dates (month/year): _____ to: _____
and title of employees you supervised: _____
Equipment/Software used: _____
Reason for leaving: _____

Job Title: _____ **Duties:** _____
Employer: _____
City & State: _____
Ending Salary: _____ Hours/week: _____
Dates (month/year): _____ to: _____
and title of employees you supervised: _____
Equipment/Software used: _____
Reason for leaving: _____

Position applied for: _____

How did you find out about this employment opportunity?

- _____ Newspaper*
- _____ Radio/TV*
- _____ Virginia Employment Commission
- _____ Department of Human Resource Management web page
- _____ State RECRUIT system
- _____ Agency web page
- _____ Local Library
- _____ Other (please specify)

* specify name of newspaper or other media

Pursuant to federal regulations, we collect responses to the questions below for record keeping purposes. This optional information will **NOT** be kept with your application for employment. Federal law prohibits unlawful discrimination on the basis of race, color, sex, age, national origin, religion, or disability.

Check the block for the racial or ethnic group with which you identify:

- _____ White (includes Arabian)
- _____ Black (includes Jamaican, Bahamians and other Caribbeans of African but not Hispanic or Arabian descent)
- _____ Hispanic (includes persons of Mexican, Puerto Rican, Central or South American or other Spanish origin or culture)
- _____ Asian or Asian American (includes Pakistanis, Indians, and Pacific Islanders)
- _____ American Indian (includes Alaskans)

Check the appropriate block:

- _____ Female
- _____ Male

Please indicate your date of birth: ____/____/____

FOR OFFICE USE ONLY
EEO Category: _____