

# Shelby County Court of Common Pleas Juvenile Division

Judge Jeffrey J. Beigel

## **JOB POSTING**

**POSITION:** Community Service Coordinator  
(Full-Time/30 hours per week)

**SALARY:** \$23,400 - \$28,470 per year

**Job Duties:** Direct and manage the community service program, track and keep records of juveniles assigned to work off court-ordered hours, report hours to court staff, coordinate with local agencies to provide service. Develop, organize, facilitate, collaborate, market and supervise youth community service activities and projects. Develop partnership with local non-profits and agencies to facilitate and market the program. Develop and implement Service Learning Projects.

**Position Requirements:** Must have a passion and strong desire to work with middle and high school students; be innovative, welcome challenge, resourceful, and work well independently and with others to create positive outcomes; and has excellent leadership and customer service skills. Must have the ability to coordinate, organize and implement a variety of activities and programs; and be a creative thinker and problem solver.

Must establish and maintain rapport with youth. Must have valid Ohio driver's license, good driving record, and proof of insurance. Must be able to drive and transport youth to job sites. Must pass criminal and traffic background check and drug screen. Must be able to maintain flexible schedule to meet program demands (some evenings may be required). Must demonstrate predictable and regular attendance. Must be able to work in adverse conditions such as weather.

**Position Qualifications:** An Associate's Degree in the field of Human Services is highly preferred. Candidates who have experience in teen programming and/or experience working with groups of youth and collaborating with various diverse agencies is highly desirable.

Resume and cover letter must be submitted by 4 p.m. on Friday, September 6, 2019 to [juvenileprobate@shelbycoprobate.org](mailto:juvenileprobate@shelbycoprobate.org) or by mail to Court Administrator, Shelby County Juvenile Court, P.O. Box 4187, Sidney, Ohio 45365

*Shelby County is an Equal Opportunity Employer/Drug Free Workplace. In compliance with the Americans with Disabilities Act, the County will provide reasonable accommodations to qualified individuals with disabilities and encourages both prospective and current employees to discuss potential accommodations with the employer.*



**SHELBY COUNTY APPOINTING AUTHORITY  
PERSONNEL POLICY AND PROCEDURE MANUAL**

**AN EQUAL OPPORTUNITY EMPLOYER APPLICATION  
FOR EMPLOYMENT**

**SECTION III – EMPLOYMENT HISTORY**  
(In chronological order beginning with the most recent):

<p>1.</p> <p>_____</p> <p>Employer's Name</p> <p>_____</p> <p>Street Address/City/State/Zip</p> <p>_____</p> <p>Supervisor's Name</p>	<p>Dates Employed:</p> <p>From: _____</p> <p align="center">Month/Year</p> <p>To: _____</p> <p align="center">Month/Year</p>	<p>Your Job Title:</p> <p>Beginning: _____</p> <p>End: _____</p> <p>Your Salary: _____</p> <p>Beginning: _____</p> <p>End: _____</p>
<p>Describe your duties, responsibilities, equipment operated, etc., for position(s) held:</p> <p>_____</p> <p>_____</p>		
<p>Describe your reason(s) for leaving:</p> <p>_____</p>		
<p>2.</p> <p>_____</p> <p>Employer's Name</p> <p>_____</p> <p>Street Address/City/State/Zip</p> <p>_____</p> <p>Supervisor's Name</p>	<p>Dates Employed:</p> <p>From: _____</p> <p align="center">Month/Year</p> <p>To: _____</p> <p align="center">Month/Year</p>	<p>Your Job Title:</p> <p>Beginning: _____</p> <p>End: _____</p> <p>Your Salary: _____</p> <p>Beginning: _____</p> <p>End: _____</p>
<p>Describe your duties, responsibilities, equipment operated, etc., for position(s) held:</p> <p>_____</p> <p>_____</p>		
<p>Describe your reason(s) for leaving:</p> <p>_____</p>		

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<p>3.</p> <p>_____</p> <p>Employer's Name</p> <p>_____</p> <p>Street Address/City/State/Zip</p> <p>_____</p> <p>Supervisor's Name</p>	<p>Dates Employed:</p> <p>From: _____</p> <p style="padding-left: 40px;">Month/Year</p> <p>To: _____</p> <p style="padding-left: 40px;">Month/Year</p>	<p>Your Job Title:</p> <p>Beginning: _____</p> <p>End: _____</p> <p>Your Salary: _____</p> <p>Beginning: _____</p> <p>End: _____</p>
<p>Describe your duties, responsibilities, equipment operated, etc., for position(s) held:</p> <p>_____</p> <p>_____</p>		
<p>Describe your reason(s) for leaving:</p>		
<p>4.</p> <p>_____</p> <p>Employer's Name</p> <p>_____</p> <p>Street Address/City/State/Zip</p> <p>_____</p> <p>Supervisor's Name</p>	<p>Dates Employed:</p> <p>From: _____</p> <p style="padding-left: 40px;">Month/Year</p> <p>To: _____</p> <p style="padding-left: 40px;">Month/Year</p>	<p>Your Job Title:</p> <p>Beginning: _____</p> <p>End: _____</p> <p>Your Salary: _____</p> <p>Beginning: _____</p> <p>End: _____</p>
<p>Describe your duties, responsibilities, equipment operated, etc., for position(s) held:</p> <p>_____</p> <p>_____</p>		
<p>Describe your reason(s) for leaving:</p>		

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SECTION IV – EDUCATION AND TRAINING

	Formal Education	College	Technical School
School Name and Location			
Years Completed	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 Above	1 2 3 4 Above
Diploma/Degree/Major			
Other School(s) attended:			
Please describe the courses you took, technical training you received, or skills you have attained which you feel would help you perform the job for which you are applying (e.g., special machines or equipment you operate, hobbies or volunteer work projects which have taught you qualifying skills, etc.): <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>			

SECTION V – MISCELLANEOUS

(The following information will be used only if it is directly related to the classification/position for which you are applying)

Have you ever been employed in the state or county service of the state of Ohio?  Yes    No

If you answered “Yes” to the last question, please explain:

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Have you ever filed an application here before?  Yes    No

Have you ever been employed here before?  Yes    No

1. Do you have any commitments (i.e., second job, school, etc.) which might interfere with or adversely affect your employment should we select you for a position? \_\_\_ Yes   \_\_\_ No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

2. Do you possess a valid driver's license? \_\_\_ Yes   \_\_\_ No  
If no, can you obtain one prior to employment? \_\_\_ Yes   \_\_\_ No

3. Are you a resident of Ohio? \_\_\_ Yes   \_\_\_ No

**SECTION VI – REFERENCES**

[Please give the name, address, and phone number of three (3) references not related to you who would know of your skills for this position]:

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone

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\*\*\*\*\*  
PLEASE READ EACH OF THE FOLLOWING PARAGRAPHS CAREFULLY. INDICATE YOUR UNDERSTANDING OF, AND CONSENT TO, THE CONTENTS AND CONDITIONS OF EACH PARAGRAPH BY PLACING YOUR INITIALS AT THE END OF EACH PARAGRAPH. IF YOU HAVE QUESTIONS REGARDING THESE PARAGRAPHS, CONTACT THE EMPLOYER BEFORE INITIALING THE PARAGRAPH.  
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\*\*PLEASE READ CAREFULLY\*\*

1. I understand and accept that if I am selected for employment, my employment may be conditioned upon my passing any medical examination that the employer deems necessary to determine whether I can physically perform the essential functions of the position, with reasonable accommodation when necessary. I understand and accept that this may include drug, alcohol, or substance abuse testing.

INITIALS \_\_\_\_\_

2. If employed, I understand and accept that, depending on the department in which I am applying for employment, I may be required to work evening shifts or night shifts, including weekends and be on call and work mandatory overtime hours.

INITIALS \_\_\_\_\_

3. I understand and accept that if any information required in this application is found to be falsified or intentionally excluded, my application may be disqualified from further consideration. I further understand and accept that if I am employed by the employer, I may be subject to disciplinary action, including termination, if any information required by this application has been falsified or intentionally excluded.

INITIALS \_\_\_\_\_

4. I understand and accept that the employer requires a high degree of integrity and confidentiality of its employees. I also understand and accept that I may need to be fingerprinted. Therefore, I understand and accept that it is necessary for the employer to investigate my background for any criminal or unlawful activity.

INITIALS \_\_\_\_\_

5. I understand and accept that the Employer utilizes direct deposit as a method of issuing paychecks. I further acknowledge that, as a condition of employment, I will be required to participate in the direct deposit program, if employed.

INITIALS \_\_\_\_\_

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6. I hereby authorize the employers, schools, and personal references named in this application, to provide information regarding me to the employer. I further authorize the release of personnel, academic, and other records to the employer.

INITIALS \_\_\_\_\_

7. I AGREE THAT ANY CLAIM OR LAWSUIT RELATING TO MY SERVICE WITH SHELBY COUNTY MUST BE FILED NO MORE THAN SIX (6) MONTHS AFTER THE DATE OF THE EMPLOYMENT ACTION THAT IS THE SUBJECT TO THE CLAIM OR LAWSUIT. I WAIVE ANY STATUTE OF LIMITATIONS TO THE CONTRARY.

INITIALS \_\_\_\_\_

I hereby declare that the information provided by me in this application for employment is true, correct, and complete to the best of my knowledge. I understand that, if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal.

I authorize you to obtain information through contacts with my former employers and references listed above.

I understand this application will remain in the active application file and be considered only for a period of 180 days, after which I must submit a new application if I wish to continue to be considered for employment by Shelby County.

I SOLEMNLY SWEAR THAT ALL OF THE INFORMATION FURNISHED IN THIS EMPLOYMENT APPLICATION IS TRUE, ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT ANY MISREPRESENTATION OR FALSIFICATION OF THE INFORMATION PROVIDED MAY LEAD TO WITHDRAWAL OF AN EMPLOYMENT OFFER OR TERMINATION FOLLOWING EMPLOYMENT. I RECOGNIZE THAT MY FUTURE EMPLOYMENT WITH THE EMPLOYER WILL BE JEOPARDIZED IF I ENGAGE IN SUBSTANCE ABUSE, ILLEGAL DRUG USE, OR ALCOHOL ABUSE.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



