

FACILITIES MANAGER

Days: Monday – Friday, Hours: 8:30am to 5:00pm

POSITION SUMMARY:

Under the supervision of the Facilities Director and Director of Technology this position will assist in managing the physical operations of the school building; includes, performing a variety of maintenance tasks including but not limited to electrical, plumbing, painting, custodial and other light maintenance tasks and duties in a professional and timely manner. Some experience in construction, operating power tools, and interpreting architectural blueprints and schematics as well as education or certifications related to communications technology are preferred.

MINIMUM QUALIFICATIONS:

Minimum of one year of college or trade school and three (3) years building maintenance and communications technology experience, or any equivalent combination of training and experience.

DUTIES AND RESPONSIBILITIES: The following duties are typical for this classification. Duties and responsibilities include but are not limited to:

1. Managerial Responsibilities

- Supervise maintenance and custodial staff to verify assigned tasks have been satisfactorily completed.
- Recommend necessary maintenance needs and improvements to facilities and grounds.
- Routinely meet with contractors to obtain cost effective quotes.
- Supervise contractors while on premise and validate their work is completed.
- Responds to emergency maintenance requests (evenings and weekends).
- Maintains records of scheduled maintenance procedures.
- Create, update and maintain documentation on building systems.
- Coordinate events in building, which may be for extra-curricular, sport or advancement.

2. Building Maintenance

- Perform electrical, plumbing, carpentry, locksmithing and painting work to maintain buildings.
- Performs minor and major repair of all buildings and equipment. Inspect condition of roofs, clean roof gutters and drains.
- Performs preventive maintenance procedures on building mechanical equipment on a scheduled basis; inspects belts, checks fluid levels, replaces filters, greases bearings, seals, etc.; repairs or replaces broken parts.
- Replaces broken windows; repairs doors, door locks and closets; installs window blinds.
- Oversee parking lot light program; install and repair lamps, ballasts and covers.
- Repair locking systems on doors, files, cabinets and lockers.
- Installs electrical wiring and equipment; new electrical services, wiring during remodeling projects; replaces and repairs wiring as needed.

- Install and maintain low-voltage infrastructure cabling to support data, HVAC, security, and video networks.
 - Installation of video surveillance and audio-visual equipment.
 - May repair electrical locks and control panels to maintain building security.
 - Assists with the renovation/remodeling of buildings; repairs plaster and drywall; paints building structures.
3. Performs custodial duties such as routine cleaning.
- Sweep and mop floors (possible use of floor machine).
 - Clean and disinfect restrooms.
 - Clean windows.
 - Removal of trash.
4. Performs light facility maintenance duties including:
- Replacing light bulbs.
 - Restock restrooms (paper towels, soap, toilette paper, etc.).
 - Seasonal work including but not limited to grounds maintenance; landscaping and snow removal as required.
 - Movement of furniture including but not limited to furniture, class chairs, filing cabinets.

PHYSICAL REQUIREMENTS AND WORK ENVIRONMENT:

Work involves moderate to heavy work in all seasons of weather. The physical demands described here represent those that an employee must meet to perform the essential functions of this job successfully. Reasonable accommodations may be made to enable individuals with disabilities to perform essential functions. While performing the duties of this job, the employee is frequently required to stand, stoop, walk, climb, twist, kneel, and crawl for extended periods. While performing the duties of this job, the employee may occasionally push or lift to 60 lbs. The employee is directly responsible for other people's safety, well-being, or work output. Specific vision abilities this job requires include close vision, such as reading handwritten or typed material and adjusting focus. The position requires the individual to meet multiple demands from several people and interact with the public and other staff.

APPLY

Please complete the Brother Rice High School application and send a resume to employment@brrice.edu



BROTHER RICE HIGH SCHOOL

EMPLOYMENT APPLICATION

This form has been designed to comply with Michigan and Federal Fair Employment Practice laws prohibiting discrimination. All qualified applicants will receive equal consideration for employment without regard to race, religion, color, sex, national origin, age, military background, handicap, marital status, height, and weight or arrest record.

Date _____

Last Name _____ First Name _____ Middle Initial _____

Address _____

City _____ State _____ Zip Code _____

Home Phone (____) _____ Cell Phone (____) _____

Work Phone (____) _____ Email _____

Birthdate: _____ Place of Birth: _____ Religious Affiliation: _____

In brief, what is your main reason for applying to Brother Rice High School? _____

Desired Position _____

How did you learn about this job? _____

Have you ever applied for employment with Brother Rice High School before? _____

Have you ever been employed with Brother Rice High School before? _____ If yes, give dates _____

If you were employed by Brother Rice High School previously, why did you leave? _____

Are you related to anyone currently employed by Brother Rice? _____

If yes, name & relationship _____

Have you ever been discharged or required to resign from a position? _____

If yes, when and why? _____

Are you on a lay-off and subject to recall? _____

Will you work overtime, if required? _____

Are you legally eligible for employment in this country? _____

Do you have a valid driver's license? _____ DL# _____ State _____

Has your driver's license ever been suspended, revoked or restricted? _____

If yes, when and why? _____

Have you ever been refused surety bond? _____

If yes, when and why? _____

Have you ever been convicted of a felony? _____

Have you ever been convicted of child abuse or neglect? _____

Have you ever been convicted of a felony involving harm or threatened harm? _____

If yes to any of the above, please describe in detail _____

EMPLOYMENT HISTORY

List your previous two (2) employers, starting with the most recent, including military experience. Explain any gaps in employment in the COMMENTS section below.

Employer _____ Telephone _____ Dates Employed _____

Address _____ Job Title _____

Hourly Rate/Salary _____ Immediate Supervisor & Title _____

Reason for Leaving _____ May we contact for reference? _____

Summarize the nature of the work and job responsibilities _____

Employer _____ Telephone _____ Dates Employed _____

Address _____ Job Title _____

Hourly Rate/Salary _____ Immediate Supervisor & Title _____

Reason for Leaving _____ May we contact for reference? _____

Summarize the nature of the work and job responsibilities _____

COMMENTS (including explanation of any gaps in employment) _____

Have you signed a nondisclosure or non-compete agreement with your current or any past employers? _____

SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experience that may qualify you for work within Brother Rice. _____

SPECIAL ACCOMPLISHMENTS

List any publications; awards (exclude information which would reveal sex, race, religion, national origin, age, ancestry, disability or other protected status). _____

ADDITIONAL INFORMATION

List anything else you would like us to consider _____

MILITARY SERVICE

Branch of Service, if any _____ Rank: _____

EDUCATIONAL HISTORY

High School _____ Year of Graduation _____

City _____ State _____

College _____

Degree Attained _____ Major _____ GPA _____ Year _____

College _____

Degree Attained _____ Major _____ GPA _____ Year _____

College _____

Degree Attained _____ Major _____ GPA _____ Year _____

CERTIFICATION

State: _____ Number: _____ Type: _____



BROTHER RICE HIGH SCHOOL

PLEASE READ CAREFULLY

Applicant's Certification, Authorization, and Acknowledgment

I certify that the facts as set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this Application may subject me to dismissal. You are authorized to make an investigation of my employment history and my personal history through any investigative or bureaus of your choice, and to contact any of my former employers and I give such employers the right to release to you all records of my employment (excluding medical records), including assessment of my job performance and ability. I understand that you may require a motor vehicle record report and I authorize you to obtain said report. I understand that you reserve the right to require that an offer of employment is conditional upon the results of a medical examination including, but not limited to, any drug screening test. I understand that you reserve the right to require a drug screening test at any time during employment. If employed, I understand that if I need an accommodation for a disability, under the Michigan Persons with Disabilities Civil Rights Act: 1) I must notify my employer in writing of my need for an accommodation; 2) I must give notice within one hundred eighty-two (182) days after I know or should have known I need that accommodation and; 3) My failure to provide that notice will prevent me from claiming that my employer failed to accommodate my disability. This requirement does not waive an individual's rights under the Americans with Disability Act. I further understand that the use of this Application does not indicate that there are any positions open and does not in any way obligate Brother Rice High School. This Application is current for ninety (90) days. At the conclusion of this time, if I have not been employed by Brother Rice and still wish to be considered for employment, it will be necessary for me to fill out a new Application. I further understand that if employed, I agree, in partial consideration of my employment, that I shall not commence any action or other legal proceeding relating to my employment or the termination thereof more than six (6) months after the termination of such employment and agree to waive any statute of limitations to the contrary.

FURTHER, I UNDERSTAND AND AGREE, THAT IF I AM HIRED BY BROTHER RICE HIGH SCHOOL, UNLESS SPECIFICALLY SET FORTH IN WRITING TO THE CONTRARY AND SIGNED BY THE PRESIDENT OF BROTHER RICE HIGH SCHOOL AND MYSELF, MY EMPLOYMENT WILL BE FOR NO DEFINITE PERIOD, AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES OR SALARY, BE TERMINATED AT ANY TIME FOR ANY REASON OR NO REASON AT THE WILL OF THE PRESIDENT OR MYSELF WITHOUT ANY PREVIOUS NOTICE.

Child Abuse and Neglect Policy

Child abuse and neglect is against the law. Anyone that has been convicted of child abuse and neglect will not be employed by Brother Rice High School. A child abuse and neglect conviction will be grounds for immediate dismissal from the school's employ.

Signature of Applicant _____ Date _____

MICHIGAN WAIVER AGREEMENT AND STATEMENT FOR SCHOOLS

An Individual Applicant's Request for a Fingerprint-Based Criminal History Record Information (CHRI) Background Check Result for a Qualified Entity in Accordance with the Michigan School Volunteer & Employee Criminal History Program

Pursuant to the National Child Protection Act (NCPA) of 1993, as amended by the Volunteers for Children Act (VCA), this form should be completed and signed by every current or prospective employee, volunteer, and contractor/vendor, for whom criminal history records are requested by a qualified entity (i.e. school or management company) under these laws.

I hereby authorize (**enter name of Qualified Entity**) Brother Rice High School,
to receive the results of my state and federal fingerprint-based CHRI background check result for the purpose of evaluating and determining my fitness to have responsibility for the safety and well-being of children or individuals with disabilities. Prior to submitting my fingerprints to the Michigan State Police to conduct a CHRI background check, I will complete, sign, and return this form and a Livescan Fingerprint Background Check Request form (RI-030). I understand the Qualified Entity will retain all required documentation for a period of time no less than prescribed by state or federal laws. By signing this Michigan Waiver Agreement and Statement, it is my intent to authorize the dissemination of any state and national CHRI that may pertain to me to the Qualified Entity with which I am, or am seeking to be, employed or to serve as a volunteer, pursuant to the NCPA VCA.

I understand that until the criminal history background check is completed, the Qualified Entity may choose to deny me unsupervised access to children or individuals with disabilities. I further understand that upon request the Qualified Entity will provide me a copy of the CHRI background results, if any, and that I am entitled to challenge the accuracy and completeness of any information contained in such results. I may obtain a prompt determination as to the validity of my challenge before the Qualified Entity makes a final decision about my status; as an employee, volunteer, contractor, or subcontractor.

Printed/Typed Name		Date of Birth	
Address	City	State	ZIP Code
What is your current or prospective status (check one)? <input type="checkbox"/> Employee <input type="checkbox"/> Volunteer <input type="checkbox"/> Contractor/Vendor			
Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please provide a description of the crime and the particulars of the conviction.			
I understand that I may be asked to assist with obtaining any and all official disposition documentation regarding my conviction.			
If you are an employee, prospective employee, or a volunteer of a public school academy, do you authorize release of your CHRI results to another qualified entity (i.e. school or management company) for a like purpose? If yes, indicate the name of the other qualified entity below. <input type="checkbox"/> Yes <input type="checkbox"/> No			
Name of Other Qualified Entity			
Signature		Date Signed	

ORIGINAL - MUST BE RETAINED BY QUALIFIED ENTITY