



CITY OF WEST ALLIS
DEPARTMENT OF DEVELOPMENT

PLANNING INTERN

JOB SUMMARY: This is a semester-long internship that would expect the ideal candidate to work at least 20 hours per week, with flexibility to work within a student's schedule. The Department of Development is located in City Hall on the corner of S. 76 St. and W. Greenfield Ave. Typical work hours range from 8 am to 5 pm, Monday – Friday, with occasional night and weekend opportunities. This position is responsible for office and fieldwork associated with urban planning. The suggested starting salary is \$12.00/hr. for undergraduate students and \$13.00/hr. for graduate students.

NATURE OF THE WORK: An employee in this classification assists in the implementation of general urban planning and redevelopment projects including neighborhood redevelopment, comprehensive planning and zoning, and historic preservation.

The work primarily involves:

- collection and analysis of a wide range of community and urban planning information;
- preparation of planning documents, analytic reports and graphic materials;
- researching and providing related information, interpretations, evaluations, and recommendations regarding planning and redevelopment strategies, processes, policies and ordinances; and,
- operation of GIS systems.

Administrative direction and supervision is received from the Planning and Zoning Manager with additional guidance from the Community Development Manager and other planning staff.

DUTIES: Typical duties include:

- assisting the Planning Division in the implementation of general planning projects;
- conducting studies and preparing reports related to updating the City's 2030 Comprehensive Plan, Historical Preservation Planning, population, housing, economic indicators, land use, public facilities, neighborhood revitalization and other related areas;
- planning, coordinating and compiling survey data;
- reviewing zoning maps and ordinance amendments to determine compliance with existing codes and ordinances;
- inspecting specified physical conditions in field surveys, such as zoning and land use standards;
- assisting the Community Development Division in analyzing development scenarios and financing proposals, including tax incremental financing;
- assisting in special projects, including zoning code review, design guidelines, public participation, CDBG programs, Bike Plan implementation, neighborhood planning, corridor planning and redevelopment studies;
- preparing base maps, charts, development scenarios and other related data utilizing the GIS system;
- responding to inquiries on land development and other planning functions;
- taking photographs, and creating multi-media presentations, exhibits, marketing materials and web site updates;
- preparing files and maintaining a filing system for approved site, landscape, architectural and screening plans and records;
- establishing and maintaining effective public relations;
- preparing lists for notices of public hearings and posting legal notices; and,
- performing other duties as assigned.

DESIRABLE KNOWLEDGE, SKILLS AND ABILITIES:

- intermediate knowledge of the principles, techniques and objectives of urban planning and redevelopment;
- ability to collect, analyze and interpret data;
- ability to prepare clear and concise written and oral reports;
- ability to quickly learn City codes and ordinances;
- ability to keep accurate records;
- ability to read and understand maps and plans;
- ability to establish and maintain effective working relationships with other employees and the public;
- ability to communicate effectively, both verbally and in writing;
- ability to understand and follow verbal and written instructions;
- ability to seek supervisory guidance, yet make individual decisions; and,
- working knowledge of Microsoft Office, ArcGIS, Adobe Photoshop and social media.

MINIMUM REQUIREMENTS: Completion of introductory courses in Urban or Regional Planning or related fields such as, political science, public administration, urban geography, urban sociology or urban studies.

APPLICATION DEADLINE: Please complete the attached application and e-mail a cover letter and résumé to the attention of Katie Bennett at kbennett@westalliswi.gov by **September 14, 2018**.

If you have any questions, contact Katie at (414) 302-8463 or at kbennett@westalliswi.gov.

Steven Schaer, AICP
Manager of Planning and Zoning
Department of Development
7525 W. Greenfield Ave.
West Allis, WI 53214

This position is funded in part by Community Development Block Grant (CDBG) funds. The City of West Allis is an Equal Opportunity/Affirmative Action Employer and does not discriminate against individuals on the basis of race, color, religion, age, marital or veterans' status, sex, national origin, disability, or any other legally protected status in the admission or access to, or treatment or employment in, its services, programs or activities.

Upon reasonable notice the City will furnish appropriate auxiliary aids and services when necessary to afford individuals with disabilities an equal opportunity to participate in and to enjoy the benefits of a service, program or activity provided by the City.

It is the policy of the City of West Allis to provide language access services to populations of persons with Limited English Proficiency (LEP) who are eligible to be served or likely to be directly affected by our programs. Such services will be focused on providing meaningful access to our programs, services and/or benefits.



APPLICATION FORM

ATTENTION APPLICANTS - PLEASE READ

Following are important points to know about the City of West Allis application process:

1. **Applications must be completed in full.** Applications not completed in full may be subject to disqualification.
2. A completed application form is required. You may supplement the application form with a resume; however, providing a resume does not exclude you from completing the application form in full.
3. It is to your advantage to be clear and thorough when completing the application, as it is the only means the City has of reviewing your qualifications for employment. We cannot assume more than what you tell us.
4. If you faxed or emailed your application, you still need to mail in or drop off the original in order to be considered for employment.
5. After all the applications are reviewed, the most qualified candidates will be invited to participate in other phases of the hiring process. All applicants are evaluated on job-related factors only.
6. If you will be unavailable (e.g., out of town) within the next 90 days, please indicate the dates you will not be available on the front section of the application form. Dates of unavailability will be reviewed to determine if any accommodations are feasible.
7. It is the policy of the City of West Allis to provide reasonable accommodations for qualified individuals with disabilities who are applicants for employment. If you are a qualified individual with a disability and need a reasonable accommodation in the testing or interview phase of our hiring process, please contact the Human Resources Department at (414) 302-8270 or e-mail jbarwick@westalliswi.gov at least 72 hours (i.e., three (3) work days) in advance. Each request for accommodation will be reviewed on a case-by-case basis and accommodated unless it is determined to be unreasonable.
8. If you are having problems completing the application form or have any questions or concerns, contact the Human Resources Department.

The City of West Allis is an Equal Opportunity/Affirmative Action Employer and does not discriminate against individuals on the basis of race, color, religion, age, marital or veterans' status, sex, national origin, disability, or any other legally protected status in the admission or access to, or treatment or employment in, its services, programs or activities.

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(APPLICANT MAY RETAIN THIS PAGE)

TEAR HERE

TEAR HERE

TEAR HERE



Human Resources Department
7525 West Greenfield Avenue
West Allis, Wisconsin 53214

Exam No. _____

Telephone: 414-302-8270
Fax: 414-302-8275
www.westalliswi.gov

City of West Allis An Equal Opportunity Employer

APPLICATION FOR EMPLOYMENT

IMPORTANT: READ THE INSTRUCTIONS CAREFULLY BEFORE FILLING OUT YOUR APPLICATION. EXCEPT WHERE NOTED, ALL REQUESTED INFORMATION MUST BE FURNISHED. THE INFORMATION YOU GIVE WILL BE USED TO DETERMINE YOUR QUALIFICATIONS FOR EMPLOYMENT. PLEASE TYPE OR PRINT.

Dates of unavailability (If you are planning to be out-of-town within the next 90 days, please indicate the dates you will not be available):

Position applied for _____

Name _____
(LAST) (FIRST) (MIDDLE)

Social Security Number _____

Other names under which you have been legally known _____

Address _____
(STREET) (CITY) (STATE) (ZIP)

Phone Number: Home _____ Cell _____

E-Mail Address _____

Are you at least 18 years old? Yes No

Do you have the legal right to live and work in the United States? Yes No

Do you wish to have the information contained in your application materials remain confidential as permitted by law? Yes No

If the job requires use of a motor vehicle, do you have a valid Wisconsin Driver's License? Yes No

If the job requires use of a Commercial Driver's License (CDL), do you have a valid CDL? Yes No

List CDL classification(s) and/or endorsement(s) _____

MILITARY SERVICE:

Have you ever served in the U.S. Armed Forces, National Guard or Military Reserves? Yes No

Dates of Duty: From _____ To _____
MM / DD / YYYY MM / DD / YYYY

To receive credit for veteran's preference points, you will be required to provide a copy of your DD Form 214 upon request.

EDUCATION AND TRAINING:

Do you have a High School Diploma? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of High School: _____ City/State: _____	Do you have a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No From Where: _____ City/State: _____	If no High School Diploma or GED, indicate the highest grade or year completed (6, 7, 8, 9, 10, 11, 12): _____ From Where: _____ City/State: _____
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Training Beyond High School (Technical College, College, University, or other schools you have attended)

Name and Location	Graduated	Degree Conferred	Major
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		

List any other education, training, license(s) and/or certificate(s) – be specific and include dates:

WORK HISTORY:

GIVE A COMPLETE RECORD OF ANY EMPLOYMENT, SELF-EMPLOYMENT, MILITARY SERVICE AND/OR VOLUNTEER WORK YOU HAVE HAD IN THE PAST 10 YEARS. Start with your current or most recent job. Indicate any change in job title under the same employer as a separate position. You may include positions beyond the 10-year period if they are related to the position for which you are applying. Although resumes are welcome, they may not be substituted for the information requested below.

PRESENT OR MOST RECENT EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)	KIND OF BUSINESS	
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR	
YOUR DUTIES		FROM (MO. & YR.)	TO (MO. & YR.)
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)	
		ACTUAL HOURLY RATE/SALARY STARTING ENDING	
		\$ _____ PER _____ \$ _____ PER _____	

EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)	KIND OF BUSINESS
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR
YOUR DUTIES		FROM (MO. & YR.) TO (MO. & YR.)
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)
		ACTUAL HOURLY RATE/SALARY STARTING ENDING
		\$ _____ PER _____ \$ _____ PER _____
EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)	KIND OF BUSINESS
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR
YOUR DUTIES		FROM (MO. & YR.) TO (MO. & YR.)
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)
		ACTUAL HOURLY RATE/SALARY STARTING ENDING
		\$ _____ PER _____ \$ _____ PER _____
EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)	KIND OF BUSINESS
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR
YOUR DUTIES		FROM (MO. & YR.) TO (MO. & YR.)
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)
		ACTUAL HOURLY RATE/SALARY STARTING ENDING
		\$ _____ PER _____ \$ _____ PER _____
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		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)
		ACTUAL HOURLY RATE/SALARY STARTING ENDING
		\$ _____ PER _____ \$ _____ PER _____
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YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR
YOUR DUTIES		FROM (MO. & YR.) TO (MO. & YR.)
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)
		ACTUAL HOURLY RATE/SALARY STARTING ENDING
		\$ _____ PER _____ \$ _____ PER _____

Use a separate sheet to continue with any additional qualifying employment data, using same format as above.

If you were discharged for cause from any employment, state the details:

List any equipment, machines, tools, or computer software you are skilled in using:

Have you applied with the City of West Allis before? Yes No If yes, for what position(s) and when?

CERTIFICATION AND AGREEMENT

I certify that answers given by me to the foregoing questions and statements are true and complete to the best of my knowledge. I understand and agree that any misstatements or omissions herein subject me to disqualification or dismissal.

I authorize the City of West Allis to make such investigations and inquiries of my employment, character, qualifications, and medical history as may be necessary in arriving at an employment decision. I hereby release all employers, companies, schools or persons from all liability in responding to such inquiries made in connection with my application.

I further understand that in the event of employment by the City of West Allis, the City is an at-will employer and I may be terminated at any time for any reason.

(DATE)

(SIGNATURE OF APPLICANT)

(FOR HR OFFICE USE ONLY)

Comments: _____



ADDITIONAL INFORMATION

This form MUST be returned with your application materials.

The City of West Allis is an Equal Opportunity/Affirmative Action Employer and does not discriminate against individuals on the basis of race, color, religion, age, marital or veterans' status, sex, national origin, disability, or any other legally protected status.

To help us comply with Federal/State Equal Employment Opportunity record keeping and other legal requirements, please answer the questions below.

Position applied for _____ Social Security Number _____

Name _____ (LAST) (FIRST) (MIDDLE)

COMPLETION OF THIS PART OF THE FORM IS VOLUNTARY. The information you provide will not be used in the decision to hire. If you choose not to complete this section, proceed to the bottom of the form for your signature and date.

Sex: [] Male [] Female Birthdate ____/____/____ Age _____
MM / DD / YYYY

Veteran Status: [] Veteran [] Non-Veteran [] Disabled Veteran, Disability Rating _____%

Ethnic Group:

- [] Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish Culture or origin, regardless of race.
[] White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
[] Black or African American (Not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa.
[] Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
[] Asian (Not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
[] American Indian or Alaskan Native (Not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
[] Two or More Races (Not Hispanic or Latino) - All persons who identify with more than one of the above five races.

Do you consider yourself to be disabled? [] Yes [] No

[A disabled individual is: any person who has a physical or mental impairment which substantially limits one or more of such person's major life activities, or has a record of such impairment or is regarded as having such impairment. Major life activities which might be substantially limited by such impairment include: walking, talking, or otherwise communicating, self-care, socialization, work training, employment, transportation or adaptation to housing (these are examples only).]

If yes, what is the disabling condition? _____

What limitations does this condition impose on major life activities? _____

How did you hear about this job? (Please specify where applicable.)

- [] Milwaukee Journal/Sentinel [] Job Service [] School _____
[] Spanish Journal [] City Cable Channel [] Community/Minority Organization _____
[] City Website [] Bulletin Board/Walk-In [] Social Media Source _____
[] Interest Card/E-Notify Me [] Employee [] Other Website _____
[] Job Hotline [] Word of Mouth [] Other _____

The above-completed information is true to the best of my knowledge:

(DATE)

(SIGNATURE)