



# City of Gonzales

P.O. BOX 647  
PHONE: (831) 675-5000

147 FOURTH ST.  
FAX: (831) 675-2644

GONZALES, CALIFORNIA 93926  
[www.ci.gonzales.ca.us](http://www.ci.gonzales.ca.us)

## ADMINISTRATIVE ASSISTANT

### GENERAL STATEMENT OF DUTIES

To perform a variety of routine and responsible clerical, customer service and accounting support activities related to accounts payable, utilities billing, licensing activities; to word process, enter information into various computer systems, file and provide other general office support services to administrative staff; to act as city receptionist answering telephones, greeting visitors, and responding to requests and inquiries; to provide efficient customer service and to function as a positive and cooperative team member.

### EXAMPLES OF PRINCIPAL DUTIES

- Provides initial contact with the public and representatives of other agencies as callers and visitors to City Hall or assigned department at the front counter and/or over the telephone; determines the nature of the contact; provides factual information regarding services, policies and procedures; takes messages or directs the caller to the proper individual or department.
- Prepares correspondence, reports, forms, labels, and specialized documents from drafts, notes, previous documents, or brief instructions; may assist with the preparation of agendas, minutes, and/or other specialized documents.
- Collects, receives and processes payments recorded at the front counter (utility billings, various permits, business licenses and other revenues due the City); balances receipts and money received, generates daily balancing report and bank deposit documentation.
- Processes and matches purchase orders to invoices; tracks, reviews, and verifies warrant and purchase order requests; may research discrepancies and/or check allocations against budget appropriations; submits purchase orders to management for final review and approval.
- Provides applications, forms and other information to the public, answers questions and gives factual information regarding City services, and activities and regulations.
- Provides services to utility customers to include answering general and routine questions, processing connects and disconnects, and adjusting accounts as necessary and as approved.
- Enters monthly extra trash collection and disposal charges into individual worksheets; posts data to appropriate residential and commercial account masters.
- Prepares and updates a variety of reports and records which may require the use of mathematical calculations, spreadsheets, and/or databases as well as the gathering and consolidation of materials from multiple sources.
- Maintains designated manual and automated recordkeeping systems; researches and compiles information from such files and purges or transfers files as instructed and as required.
- Participates in the processing and tracking of various data and information such as city business license records, grant funding, loans, building permits, trust funds, police records, and other specialized reporting documentation in automated and manual systems.
- Maintains and updates standing inventories of office supplies and materials; may complete purchase orders/requests based on established standards and approved standing orders; receives approved supplies and materials, logs, and distributes to appropriate parties.
- Opens, logs in and distributes mail, logs out and processes outgoing mail in a timely manner.
- Participates in cross training activities as assigned; providing back up assistance as skills and knowledge are acquired and as assigned.
- Performs other duties as assigned.

## REQUIRED KNOWLEDGE, SKILLS AND ABILITY

- Thorough knowledge of standard and accepted office procedures, practices and equipment.
- Basic computer operations including basic word processing applications.
- Basic methods and techniques for report formatting and business writing.
- Basic mathematical calculations to include addition, subtraction, multiplication, and division.
- Standard and accepted customer service etiquette.
- Standard and accepted methods and techniques for recordkeeping.
- Standard English usage, spelling, grammar, and punctuation.
- Understand and follow both written and oral directions in an independent manner.
- Read, understand, and apply designated policies, rules, regulations, and departmental procedures.
- Learn the city's and assigned department's policies, procedures, services, and operating standards.
- Learn to operate specialized information systems software in an effective manner.
- Communicate clearly, concisely and with tact in both oral and written forms.
- Work with various cultural and ethnic groups in a tactful and effective manner.
- Word process/type accurately at a speed necessary for successful job performance.
- Meet the physical requirements necessary to perform required duties in a safe and effective manner for self and others.
- Establish and maintain effective working relationships with those contacted in the performance of required duties.

## EXPERIENCE AND TRAINING

Any combination of experience and training that would likely provide the required knowledge and abilities is qualifying. Training equivalent to High school graduation or its equivalent. Experience of at least one year of progressively responsible clerical or customer service experience. Bilingual written and oral skills (English/Spanish) highly desirable.

## ROTATION POLICY

This position is subject to designated rotations and reassignments to various City Departments in accordance with the policies and provisions established for the classification of Administrative Assistant.

## SALARY AND BENEFITS

**SALARY RANGE:** \$2,839.94 – \$3,455.22/month.

**HEALTH INSURANCE:** The City shall pay 100% of the cost of health insurance premiums for an employee's medical, vision and dental coverage, and contributes toward dependent coverage.

**RETIREMENT:** *Miscellaneous (non-safety)-Classic* employees will be enrolled in the 2% @ 60 CalPERS formula and will contribute 100% of the employee's contribution on a pre-tax basis. An employee is vested after 5 years of CalPERS participation. The City also participates in Social Security.

*Miscellaneous (non-safety)-PEPRA* employees will be enrolled in the 2% @ 62 CalPERS formula and will contribute 100% of the employee's contribution on a pre-tax basis. An employee is vested after 5 years of CalPERS participation. The City also participates in Social Security.

**HOLIDAY LEAVE:** Twelve (12) days per year.

- VACATION LEAVE:** Vacation Leave is accrued as follows:
1. Six and two-thirds (6 2/3) hours per month for less than three (3) years of service.
  2. Ten (10) hours per month for three (3) to ten (10) years of service.
  3. Eleven and two-thirds (11 2/3) hours per month for ten (10) to fifteen (15) years of service.
  4. Thirteen and one-third (13 1/3) hours per month for fifteen (15) or more years of service.
- SICK LEAVE:** Eight (8) hours per month.
- LIFE INSURANCE:** The City pays 100% of the current Life Insurance Policy.
- LONG TERM DISABILITY:** The current policy provides 60% of pre-disability earnings, reduced by deductible income after a ninety-day waiting period. The City does not provide short-term State Disability Insurance.

### **APPLICATION/SELECTION PROCEDURE AND DEADLINE**

All applicants must complete and file a City of Gonzales application form, plus submit with the application their responses to the supplemental questionnaire. A resume may be submitted with the application, but cannot take the place of the application. **Deadline is June 28, 2019.** Applications may be mailed to the Personnel Department, City of Gonzales, P.O. Box 647, Gonzales, CA 93926. If delivered in person, applications may be received at Gonzales City Hall, 147 Fourth Street, Gonzales, CA. Written applications and supplemental questionnaires will be screened, and the most qualified applicants will be invited for interviews. Applications submitted without a completed supplemental questionnaire will not be considered.

If you have a disability which may require an accommodation in the selection procedures outlined above, please notify the City Clerk in writing by the filing deadline date.

*The City of Gonzales is an Equal Opportunity Employer.*



*City of Gonzales*

[www.gonzalesca.gov](http://www.gonzalesca.gov)

**OFFICE USE ONLY**  
**DATE RECEIVED**

P.O. Box 647 \* 147 Fourth Street, Gonzales, CA 93926

☎ (831) 675-5000 ☎ (831) 675-2644

## EMPLOYMENT APPLICATION

*Please print in ink*

Date	Social Security Number	Home Phone # ( ) ( )	Cell Phone # ( ) ( )
Name (First)	(Middle)	(Last)	California Driver's License No.
Mailing Address		City	State      Zip
Type of Work or Position Applying for 1.	2.	Full Time ____ Part Time ____	Permanent ____ Temporary ____
Are you between the ages of 18 and 70? Yes__ No__	If hired, can you furnish proof of age? Yes__ No__	If you are not a U.S. Citizen, Do you have the legal right to remain and work permanently in the U.S.? Yes__ No__	Do you have permission to work Temporarily? Yes__ No__
Have you ever been employed by the City? Yes__ No__	Dates employed Department Position	Do you have a relative employed by the City? Yes__ No__	Name Department Position
Referred by	Day Phone #	Evening Phone #	

**ANSWER THESE QUESTIONS IF ANY POSITIONS FOR WHICH YOU ARE APPLYING REQUIRE PROFICIENCY IN THE FOLLOWING**

Language(s) Written	Other Skills or Special Training You Have or Machines You Operate
Language(s) Read	
Words Per Minute	Computer Programs

### EDUCATION

Highest Grade Completed 1 2 3 4 5 6 7 8 9 10 11 12	College 1 2 3 4	Graduate 1 2 3	List below only the schools you have attended at the high school level and beyond. Include technical, military, professional, college, or university.				
Name of School	Location	From Mo/Yr	To Mo/Yr	Units Completed	Degree or Diploma	Major	

EXTRACURRICULAR ACTIVITIES (you may exclude any names of organizations which may reveal your race, religion, national origin or ancestry)	HONORS RECEIVED

If you are applying for a position in a scientific, technical, professional or administrative field, list by descriptive title (not course number) the courses in your major field and all related courses you have taken at the college level. Indicate lower division courses you have taken at the college level. Indicate lower division courses with "I" upper with "U" and graduate with "C" units and final grade.

Subject	Lower, Upper or Graduate	Units	Grade	Are You Attending School Now? Yes__ No__ Where? _____ What Hours? _____ Course of Study? _____ Do You Plan Further Educational Study? Yes__ No__ What Field? _____

Certificates and licenses (give state, number and expiration date) and membership in professional societies.

Community activities, special interests: (you may exclude names of organizations, which may reveal your race, religion, national origin or ancestry)

Other Pertinent Qualifications:

### EMPLOYMENT RECORD

List your present or most recent employer FIRST and include U.S. Armed Forces experience and major volunteer experience; account for all time during at least the past ten years, including periods of unemployment. You may exclude names of organizations, which may reveal your race, color, religion, national origin or ancestry. If more space is required, attach a separate sheet to this form.

<b>EMPLOYER</b> Name and Address		YOUR JOB TITLE AND DUTIES IN DETAIL		REASON FOR LEAVING
<b>From:</b> Month      Year	<b>To:</b> Month      Year	Total # of Months/Years	Hours worked per week	
Type of Business		Name of your supervisor	Phone Number	May we contact your current employer?
<b>EMPLOYER</b> Name and Address		YOUR JOB TITLE AND DUTIES IN DETAIL		REASON FOR LEAVING
<b>From:</b> Month      Year	<b>To:</b> Month      Year	Total # of Months/Years	Hours worked per week	
Type of Business		Name of your supervisor	Phone Number	May we contact your current employer?
<b>EMPLOYER</b> Name and Address		YOUR JOB TITLE AND DUTIES IN DETAIL		REASON FOR LEAVING
<b>From:</b> Month      Year	<b>To:</b> Month      Year	Total # of Months/Years	Hours worked per week	
Type of Business		Name of your supervisor	Phone Number	May we contact your current employer?

### MILITARY SERVICE

Service Dates	Branch	Highest Grade/Rank	Type of Discharge
---------------	--------	--------------------	-------------------

*The City is an  
affirmative action/equal  
opportunity employer*

I certify that all statements on this application are true and complete to the best of my knowledge and belief. If employed, I understand that any falsification of this record may be considered cause for termination.

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



# City of Gonzales

P.O. BOX 647  
PHONE: (831) 675-5000

147 FOURTH ST.  
FAX: (831) 675-2644

GONZALES, CALIFORNIA 93926  
[www.ci.gonzales.ca.us](http://www.ci.gonzales.ca.us)

## ADMINISTRATIVE ASSISTANT

### SUPPLEMENTAL QUESTIONNAIRE

#### INSTRUCTIONS TO APPLICANTS:

This supplemental questionnaire must be submitted with your application for the position of Administrative Assistant.

This supplemental questionnaire requires that you prepare a narrative description in response to each item. In answering the following questions, please include your background, skills and experience in the areas of Administrative Assistant. Your ability to provide clear and concise answers will be used in assessing your qualifications for this position. Please limit your answers to the spaces provided.

**Applications for the position of Administrative Assistant will not be considered without the supplemental questionnaire.** Only those applicants demonstrating the best job-related qualifications will be invited for interviews. Therefore, it is to your advantage to complete this form thoroughly and accurately. The information contained within your responses will be verified through background and reference checks should you be selected as a finalist.

*Responses such as "see resume," "see application," or "see attached" will not be evaluated.*

I, THE UNDERSIGNED, UNDERSTAND THAT ALL INFORMATION PROVIDED HEREIN IS SUBJECT TO VERIFICATION AND IS TRUE TO THE BEST OF MY KNOWLEDGE AND ABILITY.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date signed

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Day Phone Number

\_\_\_\_\_  
Print Mailing Address, City, State, Zip



