

EXTENSION OFFICE MANAGER/SUPPORT SPECIALIST

Pennington County is seeking candidates for the full-time position of Extension Office Manager/Support Specialist. This position will be responsible for administrative support with department programs such as 4-H, Master Gardener, Solid Waste, and Ag Services. Other duties include maintaining office computers and related equipment.

Candidates should possess a two-year degree in Business Administration, computer support, or related field and 1+ years of related experience. Other essential skills include the ability to work independently, ability to multi-task, working with the public, experience with Microsoft Office programs, and computer trouble-shooting.

Applications and a complete job description are available in the Auditor-Treasurer's office, 101 Main St. N., Thief River Falls, MN 56701 or on our website at <http://co.pennington.mn.us> - click on 'Employment'.

Application deadline is December 20th, 2017, 4:30 p.m.

PENNINGTON COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER

POSITION DESCRIPTION PENNINGTON COUNTY

SECTION I: GENERAL INFORMATION

Position Title: Extension Office Manager/Support Specialist	Department: Extension Office
Immediate Supervisor's Position Title: Extension Educator/Ag Services Director	FLSA Status: Non-Exempt
Job Summary: Under the direction of the Ag Services/Extension Educator, the Extension Office Manager/Support Specialist is responsible for providing administrative support in the programs and services provided by the department and assists in troubleshooting and maintaining the computer programs, applications, hardware and ancillary equipment of the office. This position also coordinates the Pennington Master Gardener Program provides administrative support and services for Environmental Services, and Ag Inspector, as needed.	

SECTION II: ESSENTIAL DUTIES AND RESPONSIBILITIES

- Provides support and assists in the direction of clerical, casual, and/or volunteer support staff including Extension Educators, Solid Waste Administration, Ag Inspector. Leads summer 4-H program assistant, casual staff or part-time staff that may be assigned to the office.
- Acts as office receptionist by distributing mail, greeting visitors, answering incoming calls and taking messages and provides information to individuals as they visit the office or refers clients to proper educators, orders office supplies.
- Works with the annual 4-H program to include maintenance and updating of all enrollment membership records, coordinates registrations for all 4-H events such as county and state fair and helps prepare state annual 4-H report. Assists in coordinating the 4-H Cloverbud (K-2 after school program).
- Updates and maintains office computers, scanner and software programs. Utilizes programs to accomplish office duties such as word processing, PowerPoint presentations, publishing, database management, internet access, e-mail, maintains home page on internet & spreadsheets and social media.
- Assists with farm financial mediation efforts, Learning Circles, or other programs. Helps coordinate registration; fields phone calls; types correspondence, newsletters and brochures; and collects, documents and deposits funds.
- Serves on various county or community committees.
- Coordinates and supports the County Master Gardener Program.
- Performs other duties of a comparable level or type, as required.

SECTION III: WORK REQUIREMENTS AND CHARACTERISTICS

<p>EDUCATION/KNOWLEDGE REQUIREMENT: Minimum education required to perform adequately in position could reasonably be attained only by completing the following:</p>				
<p>REQUIRED EDUCATION/TRAINING (choose one)</p>		<p>DEGREE INFORMATION: Type of degree: (B.S., M.A., etc.)</p>		
<p>less than high school diploma</p>		<p>Major field of study or degree emphasis:</p>		
<p>High school diploma or GED.</p>				
<p>1 year college</p>	<p>x</p>			<p>2 years college</p>
<p>3 years college</p>	<p></p>			<p>4 years college</p>
<p>1st year graduate level</p>		<p>Essential knowledge and specialized subject knowledge required to perform the essential functions of the job:</p> <ul style="list-style-type: none"> • Knowledge of work processing and business productivity software (e.g. word processing, spreadsheets, presentational software, email, etc.). • Principles and methods of secretarial/clerical functions and office etiquette. • General office methods and equipment and of the functions and procedures of the department • University of Minnesota programs and information. • Fundamentals of bookkeeping and recordkeeping. • County administrative policies and procedures as it applies to the job (e.g. purchasing, billing, etc.) • Principles and practices of grammar, vocabulary and spelling. • Operation and use of computer hardware and ancillary equipment utilized by the department. • Knowledge of volunteer management and coordination principles. 		
<p>2nd year graduate level</p>				
<p></p>				
<p>Required Work Experience in Addition to Formal Education/Training: Minimum of 3 year of related experience providing clerical and secretarial support for extension or educational programs Relevant post-secondary education can substitute for experience on an equivalent basis.</p>				
<p>LICENSE/ CERTIFICATION</p>		<p>Identify licenses/certification required: Requires a valid driver's license in the State of MN.</p>		



RESPONSIBILITY FOR DIRECT SUPERVISION OF THE FOLLOWING POSITIONS

Titles of Positions Directly Supervised	# of Employees
TOTAL	

INDIRECT SUPERVISION:

Number of employees indirectly supervised: Volunteers, interns or casual staff in the office	Total: 0-3
--	----------------------

ESSENTIAL SKILLS REQUIRED TO PERFORM THE WORK	<p>Skilled in:</p> <ul style="list-style-type: none"> • Oral and written communications. • Operation of computers, printers, copiers and fax machines. • Using Microsoft Office software applications (e.g. office productivity software). • Working independently with little supervision and maintaining confidentiality. • Preparing and making presentations to various groups. • Office etiquette and customer service skills. • Establishing and maintaining effective working relationships with department personnel, the public, and other county employees. • Prioritizing and organizing a variety of responsibilities. • Maintaining a safe working environment. • Proofreading for correct grammar, vocabulary, and spelling. • Entering, tracking and summarizing department/program expenditures. • Recording and maintaining records accurately. • Time management skills. • Ability to perform job requirements with minimal supervision.
--	---

PHYSICAL JOB REQUIREMENTS: Indicate according to essential duties/responsibilities

<u>Employee is required to:</u>	Never	1-33% Occasionally	34-66% Frequently	66-100% Continuously
Stand			x	
Walk		x		
Sit				x
Use hands dexterously (use fingers to handle, feel)				x
Reach with hands and arms				x
Climb or balance	x			
Stoop/kneel/crouch or crawl		x		
Talk or hear				x



Taste or smell		x		
----------------	--	---	--	--

PHYSICAL JOB REQUIREMENTS: Indicate according to essential duties/responsibilities

<u>Employee is required to:</u>	Never	1-33% Occasionally	34-66% Frequently	66-100% Continuously
Physical (Lift & carry): up to 10 pounds		x		
up to 25 pounds		x		
up to 50 pounds	x			
up to 75 pounds	x			
up to 100 pounds	x			
more than 100 pounds	x			

PHYSICAL JOB REQUIREMENTS: Indicate according to essential duties/responsibilities

Physical requirements associated with the position can be best summarized as follows:

Light Work:

Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or a negligible amount of force constantly to move objects. Requires to stand for prolong periods of time.

HAZARDOUS WORKING CONDITIONS

Unusual or hazardous working conditions related to performance of duties:

Duties are performed in a typical county office setting where there are minimal hazards and environmental risks associated with performing the requirements of the job.

SECTION IV: CLASSIFICATION HISTORY AND APPROVAL

This Position Description reflects an accurate and complete description of the duties and responsibilities assigned to the position.

Department Head's Signature

Date

Classification History:

Prepared 9/2011 by BCC.



**PENNINGTON COUNTY
TENNESSEN WARNING**

In accordance with the Minnesota Government Data Practices Act, Pennington County is required to inform you of your rights as they pertain to the private information collected from you. Private data is that information which is available to you, but not to the public. The personal information we collect about you is private.

Minnesota Statutes 13.01 to 13.87 on Government Data Practices require that you be informed that the following information which you are asked to provide on the application for employment or after employment is considered private data:

1. Name
2. Home Address
3. Home Phone Number
4. Social Security Number
5. Date of Birth
6. Conviction Record
7. Sex
8. Age Group
9. Disability Type

We ask this information for the following reasons:

To distinguish you from all the other applicants and identify you in our personnel files;
to enable us to verify that you are the individual who makes the application;
to enable us to contact you when additional information is required;
to send you notices and/or schedule you for interviews;
to determine if you meet the minimum age requirements (if any);
to conduct proper investigations if you are applying for a position;
to determine whether or not your conviction record may be a job related consideration affecting your suitability for the position you applied for;
to enable us to ensure your rights to equal opportunities;
to meet federal and state reporting requirements;
and to make processing more efficient.

The date supplied by you may be used for such other purposes as may be determined to be necessary in the administration of personnel in Pennington and the policies, rules and regulations promulgated pursuant thereto.

FURNISHING SOCIAL SECURITY NUMBERS, DATE OF BIRTH (unless a minimum age is required), SEX, AGE GROUP AND DISABILITY DATA IS VOLUNTARY, BUT REFUSAL TO SUPPLY OTHER REQUESTED INFORMATION WILL MEAN THAT YOUR APPLICATION FOR EMPLOYMENT MAY NOT BE CONSIDERED.

Private data is available only to you and to other persons in the County Office who have a bonafide need for the data, Public data is available to anyone requesting it and consists of all data furnished in the employment process which is not designated in this notice as private data.

Please acknowledge that you have read and understand the Tennesen Warning.

Signature

Date

EMPLOYMENT APPLICATION
PENNINGTON COUNTY

COUNTY COURTHOUSE

P.O. Box 616 ♦ Thief River Falls, MN 56701
(218) 683-7000

ANSWER ALL QUESTIONS – PLEASE PRINT IN BLACK INK OR TYPE

AN EQUAL OPPORTUNITY EMPLOYER, it is Pennington County's policy to provide equal opportunity in employment. The County will not discriminate on the basis of race, age, religion, national origin, marital status, disability, sex, sexual preference, status with regard to public assistance, or any other basis protected by law.

The information contained in this application is considered private data under the Minnesota Data Practices Act, and will be used only in conjunction with your possible employment. Please furnish complete information, so we may accurately and completely assess your qualifications. You may attach any other information, which provides additional detail about your qualifications for employment in the position you seek. Your application will be evaluated in comparison to the requirements for that position. As an applicant for employment, your name is considered private until you become a finalist for employment with the County. You are considered a finalist if and when you are selected and notified for a final interview.

DATE OF APPLICATION: _____

POSITIONS APPLIED FOR: _____

APPLYING FOR: Full-Time Part-Time Permanent Temporary (Seasonal)

AVAILABLE TO WORK: Weekdays Weekends Days Nights

REFERRAL SOURCE: Advertisement Friend Relative Employment Agency

Other _____

NAME: _____
Last First Middle All Prior Names

ADDRESS: _____
Street City State Zip

HOME PHONE: _____ ALTERNATE PHONE: _____

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE UNITED STATES
IN THE POSITION FOR WHICH YOU ARE APPLYING? YES NO
(Proof of citizenship or work eligibility will be required as a condition of employment.)

ARE YOU AT LEAST 16 YEARS OF AGE? YES NO

ARE YOU AT LEAST 18 YEARS OF AGE? YES NO
(An applicant must be at least 16 years of age to operate dangerous equipment. An applicant
must be at least 18 years of age, to sell intoxicating beverages or to be a volunteer or paid firefighter.)

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO

IF NO, EXPLAIN: _____

HAVE YOU PREVIOUSLY WORKED FOR THE COUNTY? YES NO

IF YES, POSITION HELD/DEPARTMENT: _____

IF YES, UNDER WHAT NAME MAY YOUR PREVIOUS EMPLOYMENT RECORDS
BE FOUND? _____

ARE YOU ON LAY-OFF AND SUBJECT TO RECALL? YES NO

CAN YOU TRAVEL IF A JOB REQUIRES IT? YES NO

DID YOU SERVE IN THE U.S. ARMED FORCES? YES NO

DESCRIBE YOUR DUTIES: _____

DO YOU HAVE ANY SPECIAL NEEDS WHICH MAY NECESSITATE
ACCOMMODATIONS IN THE APPLICATION/INTERVIEW PROCESS?
 YES NO

IF YES, PLEASE DESCRIBE THE TYPE OF ACCOMMODATION REQUESTED:

LIST ALL OTHER NAMES WHICH YOU HAVE BEEN EMPLOYED OR UNDER
WHICH YOUR EMPLOYMENT OR EDUCATION RECORDS MAY BE FOUND.

TO BE COMPLETED BY CLERICAL, ADMINISTRATIVE, AND FISCAL POSITION APPLICANTS:

Typing Ability YES NO _____ W.P.M.

Shorthand Ability YES NO _____ W.P.M.

Business Machine Experience: _____

Bookkeeping Experience: _____

TO BE COMPLETED BY LABOR AND SKILLES TRADE POSITION APPLICANTS:

Apprenticeship(s) served or trades and skills learned: _____

Capable of operating the following equipment: _____

EMPLOYMENT/VOLUNTEER EXPERIENCE

List **all** work and volunteer experience, most recent to be listed first. Include military service assignments and volunteer activities.

Employer Name: _____

Employer Address: _____

Job Title: _____

Job Duties: _____

Dates of Employment/Experience: _____

Reason for Leaving: _____

Employer Name: _____
Employer Address: _____
Job Title: _____
Job Duties: _____

Dates of Employment/Experience: _____
Reason for Leaving: _____

Employer Name: _____
Employer Address: _____
Job Title: _____
Job Duties: _____

Dates of Employment/Experience: _____
Reason for Leaving: _____

Employer Name: _____
Employer Address: _____
Job Title: _____
Job Duties: _____

Dates of Employment/Experience: _____
Reason for Leaving: _____

Employer Name: _____
Employer Address: _____
Job Title: _____
Job Duties: _____

Dates of Employment/Experience: _____
Reason for Leaving: _____

Employer Name: _____
Employer Address: _____
Job Title: _____
Job Duties: _____

Dates of Employment/Experience: _____
Reason for Leaving: _____

If you need additional space, please continue on a separate sheet of paper. Although you must fully complete this application, you may also include a job resume or other description of your work, volunteer and personal experiences which are relevant to this position.

LICENSURE

List current licenses, registrations, or certificates relevant to the position for which you are applying.

<u>License/No.</u>	<u>Issued By</u>	<u>Date</u>	<u>Expirations</u>

All applicable licenses or certifications must be received in the Personnel Office prior to employment commencing. If hired, you remain responsible for ensuring that all applicable licenses remain in effect.

EDUCATION

Include high school and/or institution GED and any additional education/courses taken. Do not list dates attendance for high school. List most recent first.

Name of School: _____
Address of School: _____
Degree/Diploma Received: _____
Major/Minor: _____
Dates of Attendance: _____

Name of School: _____
Address of School: _____
Degree/Diploma Received: _____
Major/Minor: _____
Dates of Attendance: _____

Name of School: _____
Address of School: _____
Degree/Diploma Received: _____
Major/Minor: _____
Dates of Attendance: _____

Name of School: _____
Address of School: _____
Degree/Diploma Received: _____
Major/Minor: _____
Dates of Attendance: _____

List/describe any other training and/or experience relevant to the position for which You are applying: _____

REFERENCES

Theses should be people in a position to discuss your qualifications for the position you seek. Include especially managers, directors, or heads of departments under whom you have worked. Indicate any who are related to you. The County reserves the right to contact all prior employers, educational institutions or institutions where you have volunteered in addition to references listed below.

Name of Reference: _____
Address: _____
Phone Number: _____ Title: _____

Name of Reference: _____
Address: _____
Phone Number: _____ Title: _____

Name of Reference: _____
Address: _____
Phone Number: _____ Title: _____

CRIMINAL BACKGROUND INFORMATION

The County may conduct a criminal background check on individuals upon making a contingent job offer. Please refer to the job description for this position to determine if such a check will be conducted. If the job description states that a criminal check will be conducted, no offer of employment shall become final until receipt of the results of the criminal background check from the BCA, the content of which is acceptable to the County, and formal approval by the appointing authority.

VETERAN STATUS

Are you an honorably discharged veteran of the armed forces of the United States?

Or are you otherwise eligible to claim Veteran's Preference Points? YES NO

Do you wish to claim Veteran's Preference Points? YES NO

If you are a disable veteran and wish to claim additional points, please check here. ____

Proof of applicable military status/eligibility, such as a DD214 form, will be required in order to claim credits. Please attach DD214 form or forward it within five (5) business days.

PRIOR EMPLOYMENT

Have you ever been discharged or forced to resign from prior employment? _____

If so, identify the employer and described the circumstances:

PERSONAL STATEMENT

Please indicate why you are interested in the position and what you hope to accomplish if selected: _____

UNEXCUSED ABSENCES FROM WORK

How many days were you inexcusably absent from work during the preceding three (3) Years other than absences due to illness or injury of you or your immediate family? _____

CERTIFICATION, ACKNOWLEDGEMENT AND RELEASE

I, certify, that the answers I have given on this application are true and correct to the best of my knowledge. I understand that any false or misleading information provided, or any omission or concealment of facts, will disqualify me from consideration for employment, and constitutes grounds for my immediate dismissal should I be employed by the County.

I understand, acknowledge, and agree that no offer of employment is valid or binding until formal approval by the County Board or the appointing authority referenced in the job description and that until such approval the County shall not be liable for any reliance on any oral or written offers of employment made to me.

In connection with this application **I hereby authorize** any and all current and former employers, organizations where I have volunteered ("volunteer organizations") and references named in this application, or any agent of such a current or former employer or regarding organizations, to release to the County and its agents any and all information regarding my job performance and fitness/qualifications to perform the position I am presently seeking and any other employment or related information, both public and private, in their possession. I understand that the County will use this information to determine my fitness/qualifications for the position I am seeking. This authorization expires one year from the date of my signature below.

I hereby release the County and all current and former employers, volunteer organizations and references listed herein and any and all agents acting on behalf of said County, former employers, volunteer organizations or references, for any and all liability of whatever nature by reason of requesting or providing such information.

Date _____

Signature _____

(Do not Print)

*** Notice to Applicant:** If you do not agree with any portion of the acknowledgement, certification, authorization and release, cross out that section and initial it.