



Dear Applicant,

Thank you for your interest in the position of **Fire Department Administrative Assistant (50%) / P&Z Permit Technician (50%)** with the City of Leon Valley. To ensure the proper processing of your application, the following should be submitted with your completed application:

1. Completed "Notice of Job Requirements";
2. Completed "Information Release Authorization to Obtain Criminal Records";
3. Completed "Authorization to Release Information (Private Person or Organization) to the City of Leon Valley";
4. Completed "Written Authorization to Obtain Consumer Reports for Employment Purposes";
5. Completed Driver Background Information;
6. Your résumé.

Thank you for your interest in employment with the City of Leon Valley.

Sincerely,

Lisa Hernandez  
Human Resources Director  
6400 El Verde Rd  
Leon Valley, Texas 78238-2399  
Phone: (210) 684-1391 ext. 212  
Fax: (210) 684-1515  
Email: [l.hernandez@leonvalleytexas.gov](mailto:l.hernandez@leonvalleytexas.gov)



**APPLICATION FOR EMPLOYMENT**  
(PLEASE TYPE OR PRINT CLEARLY)

**PERSONAL**

Date \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Present address \_\_\_\_\_

Telephone No. (H): \_\_\_\_\_ (W): \_\_\_\_\_ (Mobile): \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you legally eligible for employment in the U.S.A.? Yes \_\_\_ No \_\_\_ (Proof of citizenship or immigration status will be required upon employment.)

Are you of the legal age to work? \_\_\_\_\_

Position(s) applying for: \_\_\_\_\_

Were you previously employed by us? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Is any additional information relative to your use of another name necessary to enable a check on your work record? If yes, please explain. \_\_\_\_\_

If your application is considered favorably, on what date will you be available for work? \_\_\_\_\_, 2016.

Are there any other experiences, skills, training or qualifications which will be of special benefit in the job for which you are applying? \_\_\_\_\_

**RECORD OF EDUCATION**

SCHOOL	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	CHECK LAST YEAR COMPLETED				DID YOU GRADUATE ?	LIST DIPLOMA OR DEGREE
			1	2	3	4		
HIGH							<input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE							Credit Hrs Completed:  Degree Obtained:	
OTHER							<input type="checkbox"/> YES <input type="checkbox"/> NO	

LIST BELOW **ALL** PRESENT AND PAST EMPLOYMENT, BEGINNING WITH YOUR MOST RECENT. For additional employer listings, please use separate sheet of paper.

NAME AND FULL ADDRESS OF COMPANY AND TYPE OF BUSINESS	FROM		TO		WEEKLY STARTING SALARY	WEEKLY LAST SALARY	REASON FOR LEAVING	NAME OF SUPERVISOR
	MO	YR	MO	YR				
	Job Title: Work Description:							
TELEPHONE:								

NAME AND FULL ADDRESS OF COMPANY AND TYPE OF BUSINESS	FROM		TO		WEEKLY STARTING SALARY	WEEKLY LAST SALARY	REASON FOR LEAVING	NAME OF SUPERVISOR
	MO	YR	MO	YR				
	Job Title: Work Description:							
TELEPHONE:								

NAME AND FULL ADDRESS OF COMPANY AND TYPE OF BUSINESS	FROM		TO		WEEKLY STARTING SALARY	WEEKLY LAST SALARY	REASON FOR LEAVING	NAME OF SUPERVISOR
	MO	YR	MO	YR				
	Job Title: Work Description:							
TELEPHONE:								

NAME AND FULL ADDRESS OF COMPANY AND TYPE OF BUSINESS	FROM		TO		WEEKLY STARTING SALARY	WEEKLY LAST SALARY	REASON FOR LEAVING	NAME OF SUPERVISOR
	MO	YR	MO	YR				
	Job Title: Work Description:							
TELEPHONE:								

I hereby give permission to contact the employers listed above about my prior work experience. \_\_\_\_\_

Signature

If there is a particular employer(s), you do not wish us to contact, please indicate which one(s). \_\_\_\_\_

Have you ever been discharged or forced to resign for misconduct or unsatisfactory performance from any job?

Yes \_\_\_ No \_\_\_ If yes, give the name of the employer in each instance and the reason(s). \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

PERSONAL REFERENCES (NO FORMER EMPLOYERS, SUPERVISORS, OR RELATIVES)

(These individuals should have known you for several years)

NAME & OCCUPATION	FULL MAILING ADDRESS	PHONE NUMBER
		H/Cell: W:
		H/Cell: W:
		H/Cell: W:

PLEASE READ AND SIGN BELOW

The facts set forth in my application (and accompanying resume, if any) for employment are true and complete. I understand that if employed, any false statement on this application may result in my disqualification or discharge when discovered. I further understand that this application or anything conveyed during an interview is not and is not intended to be a contract of employment, nor does this application obligate the City of Leon Valley in any way if the City decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than the City Manager has authority to enter into an agreement for employment for any specified period of time or to make an agreement contrary to the foregoing, and then only in writing by the City Manager.

In making this application for employment I authorize the City of Leon Valley or its designated individuals to make an investigative report whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigative report that is made.

In consideration of my being considered for employment and/or being employed I hereby agree to and submit to physical examinations and tests as may be required by the City, and I do hereby (1) grant release and assign unto the City, all right, title and interest that I may subsequently acquire in all records and reports arising out of or in connection with said examinations and tests and (2) waive all rights to be advised on the content of said records and reports or to receive copies thereof, without the prior written consent of the City.

I also authorize the City of Leon Valley to furnish to any future employer or prospective employer any and all information they may request concerning my application for employment or employment with the City of Leon Valley. I hereby direct the City of Leon Valley to release such information upon request from a bearer of an authorization to release information. This release is executed with the full knowledge and understanding that this information is for the official use of the City of Leon Valley.

I also understand that this application for employment will be kept on file for a period of 6 months from the date of my application. I also understand that if I want to be considered for future employment at the end of this period of time that I will have to file a new application.

I hereby release the City of Leon Valley, as custodian of such records from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family, or associates because of compliance with a valid authorization and request for information or any other attempt to comply with it.

\_\_\_\_\_  
Authorizing Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date



**AUTHORIZATION TO RELEASE INFORMATION  
(PRIVATE PERSON OR ORGANIZATION)  
TO THE CITY OF LEON VALLEY FOR EMPLOYMENT**

TO WHOM IT MAY CONCERN:

I, \_\_\_\_\_, an applicant for employment with the City of Leon Valley, hereby authorize you to furnish the City of Leon Valley with any and all information they may request concerning my employment; educational records, including but not limited to academic, achievement, attendance, athletic, personal history, and disciplinary records; juvenile, police, Department of Public Safety driving and court records; military records, for determination of my potential for employment and for eligibility for certain security clearances. I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the City of Leon Valley. I also understand that neither the City nor its agent shall be violating my right to privacy in any manner and I hereby release them from all liability whatsoever for actions related to this investigation.

I hereby release you, as custodian of such records, any school, college, university, or other educational institution; hospital or other repository of medical records; credit bureau; lending institution; consumer reporting agency; or retail business establishment including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request for information or any other attempt to comply with it.

\_\_\_\_\_  
Authorizing Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date



**CITY OF LEON VALLEY TEXAS POLICE DEPARTMENT  
AUTHORITY TO RELEASE INFORMATION**

TO WHOM IT MAY CONCERN:

I hereby authorize the **City of Leon Valley Police Department** and its authorized representatives bearing this release, or a copy thereof, within one year of its date, to obtain any information in your files pertaining to my employment, military, credit, education or medical records, including not limited to academic, achievement, attendance, athletic, personal history, and disciplinary records, medical records, and credit records.

I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for official use. Consent is granted to all parties to furnish such information, as described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as custodian of such records, and any school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, or retail business establishment including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or attempt to comply with it.

I am furnishing my Social Security Account Number on a voluntary basis with the understanding such is not required by any law or regulation. I have been advised that all parties will utilize this number only to facilitate the location of employment, military, credit, and educational records concerning me in connection with this application. Should there be any question as to the validity of this release, you may contact me as indicated below:

Applicant's Printed Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_



To Applicant: **READ THIS INTRODUCTION CAREFULLY BEFORE ANSWERING ANY QUESTIONS.**

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, creed, religion, sex, national origin or disability. Federal law also prohibits other types of discrimination such as age and citizenship. The laws of most States also prohibit some or all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status or physical or mental handicap or disability. The Fair Credit Reporting Act imposes restrictions with respect to credit data.

1. How long have you lived at present address? \_\_\_\_\_
2. Previous address \_\_\_\_\_  
\_\_\_\_\_
3. How long did you live there? \_\_\_\_\_
4. Are you over the age of eighteen? Yes \_\_\_\_\_ No \_\_\_\_\_  
If no, hire is subject to verification that you are of minimum legal age.
5. Have you been bonded? \_\_\_\_\_ If yes, on what jobs? \_\_\_\_\_
6. Have you ever been convicted of a crime, **including** misdemeanors and summary offenses, in the past ten years which has not been annulled or expunged or sealed by a court? \_\_\_\_\_  
If yes, describe in full: \_\_\_\_\_  
\_\_\_\_\_
7. List any friends or relatives working for us, other than spouse. How do you know them and for how long?
  - a. \_\_\_\_\_
  - b. \_\_\_\_\_
  - c. \_\_\_\_\_
8. Will you work overtime if scheduled or requested? \_\_\_\_\_
9. Will you work weekends if scheduled or requested? \_\_\_\_\_
10. Will you be able to get to work on time each day and when called in? \_\_\_\_\_
11. How did you hear about this job opening? \_\_\_\_\_



## INFORMATION RELEASE AUTHORIZATION

### Criminal Background Check

Applicant's Name (Print): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Race: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

I, \_\_\_\_\_, do hereby authorize any law enforcement agency to furnish the City of Leon Valley or its agent information related to my criminal history. I hereby release the City of Leon Valley and all of its agents and employees, the law enforcement agency and all employees of law enforcement agencies furnishing information, from all liability, resulting from the furnishing of this information to the City of Leon Valley. I certify that the statements made by me on this form and on all pages of the City of Leon Valley Employment Application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that any false statements made herein will void my consideration for employment/continued employment and could result in disciplinary action including termination.

Signed \_\_\_\_\_

Date \_\_\_\_\_





**WRITTEN AUTHORIZATION TO OBTAIN CONSUMER  
REPORTS FOR EMPLOYMENT PURPOSES**

TO: The City of Leon Valley

FROM: \_\_\_\_\_  
Printed Name of Applicant for Employment

DATE: \_\_\_\_\_

I, the undersigned, have received from the City of Leon Valley a disclosure to individuals applying for employment with the City of Leon Valley, Texas. I have read the disclosure and I understand its contents. After reading the disclosure, I give my authorization to the City of Leon Valley to obtain consumer reports for employment purposes. I understand that if I become an employee of the City of Leon Valley, this authorization will continue in effect to authorize the City of Leon Valley to periodically obtain reports for employment purposes for the purpose of evaluating me for promotion, reassignment, or retention as an employee.

\_\_\_\_\_  
Signature of Applicant

.....  
**DISCLOSURE TO INDIVIDUALS APPLYING FOR  
EMPLOYMENT WITH THE CITY OF LEON VALLEY, TEXAS**

The City of Leon Valley hereby discloses to you that in connection with your application for employment, upon receipt of your written authorization to do so, it may obtain one or more consumer reports for employment purposes.

If the City of Leon Valley employs you, it may periodically obtain consumer reports for employment purposes, for the purpose of evaluating you for promotion, reassignment, or retention as an employee.

In each case, if information in the report influences the City's decision to deny hiring or promotion, it will provide you with appropriate action disclosures in accordance with Section 604(b)(2)(A) of the Fair Credit Reporting Act complete as of January 7, 2002.

## DRIVER'S EMPLOYMENT BACKGROUND

NAME: \_\_\_\_\_  
LAST, FIRST MI

SSN: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_

PREVIOUS ADDRESSES FOR THE LAST THREE (3) YEARS: \_\_\_\_\_

### CURRENT DRIVER'S LICENSES

STATE	LICENSE NO.	TYPE	EXPIRATION

### DRIVING EXPERIENCE

CLASS OF EQUIPMENT	TYPE OF EQUIPMENT (VAN, TANK, FLATBED, ETC.)	DATES OF OPERATION		TOTAL MILES OF OPERATION
		FROM	TO	

### ACCIDENT RECORD FOR PAST FIVE (5) YEARS

(ATTACH AN ADDITIONAL SHEET IF NEEDED)	DATE	NATURE (HEAD ON, ETC.)	NO. OF FATALITIES	NO. OF INJURIES
LAST ACCIDENT				
NEXT PREVIOUS				
NEXT PREVIOUS				

### TRAFFIC CONVICTIONS FOR THE PAST FIVE (5) YEARS (OTHER THAN PARKING VIOLATIONS)

LOCATION (CITY & STATE)	DATE	CHARGE	PENALTY

- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | YES                      | NO                       |
| A. Have you <b>ever</b> been denied a license, permit or privilege to operate a motor vehicle?                       | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Has any license, permit or privilege to operate a motor vehicle been suspended or revoked?<br>When and Why: _____ | <input type="checkbox"/> | <input type="checkbox"/> |

IF THE ANSWER TO EITHER "A" OR "B" IS YES, ATTACH A STATEMENT OF EXPLANATION.



## VOLUNTARY DATA RECORD SURVEY

Dear Applicant:

Applicants for positions with the City of Leon Valley are treated equally, without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or disability, or any other legally protected status. At the same time, as an employer with an affirmative action program, the City of Leon Valley complies with government regulations, including affirmative action responsibilities and reports where they apply.

Government agencies periodically require reports on the status of protected employees. The purpose of this Voluntary Data Record is to comply with government record keeping, reporting, and other legal requirements. This data is for statistical analysis with respect to the success of the City of Leon Valley's affirmative action program only.

Completing this Voluntary Data Record Survey is optional. All data records are kept in a confidential file and are not a part of your Application for Employment or Personnel File.

NOTE: THE DECISION TO SUBMIT THIS INFORMATION IS VOLUNTARY.

=====

Date: \_\_\_\_\_

1. Job Title of Position Applied For: \_\_\_\_\_

2. Check One:

Male: \_\_\_\_\_ Female: \_\_\_\_\_ Age: \_\_\_\_\_

Vietnam Era Veteran: \_\_\_\_\_ Disabled Veteran: \_\_\_\_\_ Disabled: \_\_\_\_\_

3. Check one of the following (ethnic/racial background):

White \_\_\_\_\_ Hispanic \_\_\_\_\_ Native American: \_\_\_\_\_

Black: \_\_\_\_\_ Asian/Pacific Islander: \_\_\_\_\_ Other: \_\_\_\_\_



## NOTICE OF JOB REQUIREMENTS

The City of Leon Valley requires that each applicant be informed of what is expected of employees in each position with the City. Attached to this notice is a job description for the position of **FIRE ADMINISTRATIVE ASST / PERMIT TECHNICIAN** with the City of Leon Valley, for which you are applying.

The City of Leon Valley is concerned with the safety, health, and well-being of all its employees. The use or misuse of alcohol, drugs, narcotics, and/or controlled substances is inconsistent with this concern and, therefore, the City requires applicants to undergo pre-employment drug screening for drugs and illegal substances. A positive test result will cause rejection of the application, unless there are extenuating circumstances, e.g., medication causing the positive result if the medication is legally prescribed by a physician as part of an approved treatment.

The City of Leon Valley is an at-will employer and does not waive the right, at any time, including in the event the applicant is employed, to discharge the employee at any time, for any reason, with or without notice, and with or without cause.

**I have read the attached job description and understand the City of Leon Valley's policies regarding drug testing and employment-at-will.**

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Signature

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Date



**CITY OF LEON VALLEY  
JOB DESCRIPTION**

**JOB TITLE:** Fire Administrative Assistant / P&Z Permit Technician  
**DEPARTMENT:** Fire Department & Planning and Zoning Department  
**FLSA STATUS:** Non-Exempt  
**EFFECTIVE DATE:** January 3, 2023

**JOB SUMMARY:**

Under the direction of the Fire Chief, 50% of your responsibility will be performing clerical work and administrative support for the Fire department to include typing, filing, receiving, and routing telephone calls, and coordinates EMS billings with private collection agency, and other related work as required.

Under general direction of the Planning and Zoning Director, 50% of your job will be clerical and technical functions in support of the Planning and Zoning Department mission, including customer service, answering telephone inquiries, permit issuance, typing, tracking, and filing Department documents, and providing information relative to land development, building, health, and code compliance regulations.

*Note: This information is intended to be descriptive of the key responsibilities of the position. The list of essential functions below does not identify all duties performed by any single incumbent in this position.*

**50% - ESSENTIAL JOB FUNCTIONS FOR FIRE DEPT. ADMINISTRATIVE ASSISTANT:**

Receive and assist visitors by answering questions by telephone, in person, and over the internet, which require general knowledge of Department policies and procedures and direct visitors as appropriate in a pleasant and efficient manner.

Accurately and legibly take phone and verbal messages and expediently distribute those messages to appropriate personnel.

Perform secretarial functions requiring discretion and specialized knowledge.

Coordinate collection for EMS billing with administrative offices at City Hall and private collection agency.

Receive telephone calls and citizen visits concerning EMS billing.

Accurately and proficiently prepare and file forms, charts, statements, letters, memos, and other departmental reports to meet deadlines.

Process and distribute departmental incoming and outgoing mail on a daily basis to include certified mailings, time-sensitive mail to receive "date received" stamping.

Assist with the administration of the departmental accounts payable accounts and payroll.

Prepare and complete all reports and paperwork promptly, legibly, accurately, neatly, and with correct grammar and spelling.

Demonstrate pleasant, courteous, and efficient interactions with the general public, City employees and Department Staff.

**50% - ESSENTIAL JOB FUNCTIONS FOR P&Z PERMIT TECHNICIAN:**

Receive and assist visitors by answering questions by telephone, in person, and over the internet, which require general knowledge of Department policies and procedures and direct visitors as appropriate in a pleasant and efficient manner.

Organize and conduct planning related studies.

Provide professional counsel and technical advice on matters related to planning and zoning.  
 Prepare reports for presentation of technical planning information for the Community Development Director.  
 May be requested to attend City Council, Zoning and Land Use Commission, and Board of Adjustment meetings as required.  
 Interacts with public and agencies by answering and resolving complaints, attending conferences and seminars, and attending meetings with department heads and agencies.  
 Must be able to read, comprehend and interpret for others City codes, plat maps and basic building plans.  
 Must be able to examine plans and specifications related to landscaping, signs and other applicable codes.  
 Reviews building plans and zoning permit applications to assure compliance with requirements such as use, bulk, placement, and parking ratios.  
 Prepares narrative staff reports and recommendations of limited complexity, such as special use permits and variances.  
 Researches and compiles information on a variety of planning issues from multiple sources.  
 Prepares public notices or property owner verifications.  
 Prepares maps, charts, tables of limited complexity.  
 Investigates violations of planning regulations and ordinances, including site visits.  
 Attends public meetings, assisting other planning staff as appropriate.  
 Ensure that departmental operations are performed in concert with all applicable laws, ordinances and policies/procedures from the City Council and City Manager.  
 Effectively communicate with elected and appointed officials, supervisors, subordinates, peers, business representatives, the general public, and the media in person, in writing, and by telephone.  
 Sit for extended periods of time writing reports, correspondences on the computers.  
 Use tact, diplomacy and discretion as required.  
 Read, write, and converse fluently in English.  
 Work a flexible schedule, to include evenings hours, weekends, and holidays.  
 Must have the ability to attend work regularly and predictably.  
 Must have the ability to perform the normal interactive functions of the job, and to withstand the normal stresses of the workplace.

**MACHINES, TOOLS, EQUIPMENT, SOFTWARE, AND HARDWARE USED:**

Must be able to proficiently operate, personal computer, postage machine, copier, facsimile, and other similar business equipment on a daily basis and in a safe manner. Proficient with Windows operating system, Microsoft Word, Excel, and Power Point and a working knowledge of Access. Must be willing to learn how to operate the City’s Financial Management software InCode. Must be willing to learn the Fire Department’s related software to track EMS billing.

**ENVIRONMENTAL FACTORS:**

Must be able to work indoor. Occasional trips outside to various public facilities.

C Continuously	F Frequently	O Occasionally	R Rarely	N Never
-Health and Safety Factors-				
Mechanical Hazards				N
Chemical Hazards				N
Electrical Hazards				N
Fire Hazards				N
Explosives				N
Communicable Diseases				N
Physical Danger or Abuse				N
Inclement Weather				R

D Daily	W Several Times Per Week	M Several Times Per Month	S Seasonally	N Never
-Environmental Factors-				
Respiratory Hazards				N
Extreme Temperatures				N
Noise and Vibration				N
Wetness/Humidity				M
Physical Hazards				M

**OVERALL PHYSICAL STRENGTH DEMANDS:**

Must be able to lift and carry a minimum of 20 pounds; climb, kneel, squat, stoop and bend freely. Walks long distances on uneven terrain and hard surfaces. Must be able to maintain all physical demands illustrated in this job description and through the course of employment.

-Physical strength for this position is indicated below with "X"-					
Sedentary	X	Light	Medium	Heavy	Very Heavy
Exerting up to 10 lbs. occasionally or negligible weights frequently; sitting most of the time.	X	Exerting up to 20 lbs. occasionally, 10 lbs. frequently, or negligible amounts constantly OR requires walking or standing to a significant degree.	Exerting 20-50 lbs. occasionally, 10-25 lbs. frequently, or up to 10 lbs. constantly.	Exerting 50-100 lbs. occasionally, 10-25 lbs. frequently, or up to 10-20 lbs. constantly.	Exerting over 100 lbs. occasionally, 50-100 lbs. frequently, or up to 20-50 lbs. constantly.

**PHYSICAL DEMANDS:**

Must be able to sit or stand for extended periods of time while performing various tasks.

C	F	O	R	N
Constantly 2/3 or more of the time.	Frequently From 1/3 to 2/3 of the time.	Occasionally Up to 1/3 of the time.	Rarely Less than 1 hour per week.	Never Never occurs.

*Note: This is intended as a description of the way the job is currently performed. It does not address the potential for accommodation.*

-Physical Demand-	-Frequency-	-Brief Description-
Standing	O	Site visits and communicating with co-workers
Sitting	C	at desk
Walking	O	around office environment
Lifting	O	office, supplies
Carrying	O	office supplies
Pushing/Pulling	F	office supplies, office chair file cabinet drawers
Reaching	O	for supplies
Fine Dexterity	F	While working on computer
Kneeling	O	retrieving items from lower shelves/ground
Crouching	O	retrieving items from lower shelves/ground
Crawling	N	
Bending	O	retrieving items from lower shelves/ground
Twisting	O	getting inside vehicle, getting office supplies
Climbing	O	stairs
Balancing	R	While performing everyday task
Vision	C	Viewing computer screen, maps documents
Hearing	C	listening coworkers, residence
Talking	C	communicating with co-workers and public and on telephone
Foot Controls	R	While driving City automobile
Other (specified if applicable)		

**JOB REQUIREMENTS:**

-Description of Minimum Job Requirements-	
Formal Education	Work requires knowledge necessary to understand basic operational, technical, or office processes. Level of knowledge equivalent to four years of high school or equivalency.
Experience	Over one year experience working with and knowledge of general office equipment, procedures, and operations. Customer service and clerical experience required.
Supervision	Job has no responsibility for the direction or supervision of others.

Human Collaboration Skills	Excellent - Professional customer service skills to include discretion, courtesy, and patience. Must be able to work closely with others as part of a team. Work may require providing advice to others outside direct reporting relationships on specific problems or general policies. Contacts may require the consideration of different points of view to reach agreement. Elements of persuasion may be necessary to gain cooperation and acceptance of ideas.
Freedom to Act	Receives Immediate Direction: The employee normally performs the duty assignment after receiving detailed instructions as to methods, procedures, and desired end results with little room for deviation. The immediate supervisor may, at times, provide close and constant review.
Technical Skills	Standardized Skill Requirements: Work requires the use of standard technical skills appropriate to the work environment of the organization.
Fiscal Responsibility	Position has moderate fiscal responsibility. May be responsible for the billing, collection and/or accounting of funds. May be responsible for the handling and balancing of cash.
Reading	Intermediate - Read, write and understand written instructions, reports, documents, periodicals, journals, manuals, dictionaries, thesauruses, and encyclopedias. Ordinarily, such education is obtained in high school up to college. However, it may be obtained from experience and self-study.
Math	Intermediate - Ability to deal with system of real numbers; practical application of fractions, percentages, ratios/proportions and measurement. Ordinarily, such education is obtained in high school up to college. However, it may be obtained from experience and self-study.
Writing	Basic - Ability to write simple sentences containing subject, verb, and object, and/or series of numbers, names, and addresses. Ordinarily, such education is obtained in elementary school up to high school. However, it may be obtained from experience and self-study.
Certification & Other Requirements	A valid class "C" Texas motor Vehicle

**PRIMARY WORK LOCATION**

Office Environment	X	Vehicle	
Warehouse		Outdoors	
Shop		Other (See Environmental Factors)	
Recreation/Neighborhood Center			