

# Chikaming Township

## Job Description

**Job title: Front Desk Clerk**

**Work Location: Front Desk**

**Division/Department: Township Office**

**Reports to: Township Supervisor**

Full-time

Part-time

Exempt

Nonexempt

### Essential Duties and Responsibilities:

The front desk clerk greets township customers as they enter the building and attempts to solve their problem directly or directs them to the proper department to have their problem solved. The clerk answers the phone with the same manner as greeting customers.

Any specific questions regarding zoning and building must be deferred to the building department.

#### Daily tasks

- Answer phones and direct caller to proper department.
- Pickup, receive, sort and deliver mail.
- Accept payments into cash receipting for water/sewer bills.
- Accept payments into cash receipting for front desk billing items.
- Accept calls and schedule water turn on/off functions.
- Accept calls and discuss particular water/sewer billing inquiries.
- Make address changes in Building and Utility Billing programs based on user requests.
- Count and reconcile cash drawers.
- Make all cash receipts into cash receipting system and give all cash customers a computer generated receipt.

#### Non-Daily tasks

- Sort and process outgoing payable checks to billing entities
- Allocate parking passes for cherry beach to authorized residents.
- Schedule use of park facilities and other township rooms
- Modify utility billing and building addresses in line with address changes from tax bills
- Fax address change forms to county
- Schedule Board of Review meeting
- Schedule use of various township facilities

#### IT Admin tasks

- Make changes to web site and upload documents at appropriate times
- Schedule meetings/rooms in outlook
- Administer email system for all township staff

### Education and/or Work Experience Requirements:

- Excellent verbal and written communication skills, including ability to effectively communicate with internal and external customers
- Excellent computer proficiency (MS Office – Word, Excel and Outlook)
- Must be able to work under pressure and meet deadlines, while maintaining a positive attitude and providing exemplary customer service.
- Ability to work independently and to carry out assignments to completion within parameters of instructions given, prescribed routines, and standard accepted practices.
- High school diploma or GED required.

- Associate degree preferred.
- A background in accounting software or generally acceptable accounting principles.
- Software background in BS&A or other packed software.
- Ability to read/modify/create software using html or other web languages
- Some administration of servers or email system.
- Ability to read software manuals and learn how to do things on your own.

**Physical Requirements:**

- Ability to safely and successfully perform the essential job functions consistent with the ADA, FMLA and other federal, state and local standards, including meeting qualitative and/or quantitative productivity standards.
- Ability to maintain regular, punctual attendance consistent with the ADA, FMLA and other federal, state and local standards
- Must be able to lift and carry up to 50 lbs
- Must be able to talk, listen and speak clearly on telephone

**Print Employee Name:**

**Employee signature:**

**Date:**

**CHIKAMING TOWNSHIP  
APPLICATION FOR EMPLOYMENT**

This Township is an equal opportunity employer and will not discriminate against any applicant on the basis of any characteristics that is protected by state or federal law. Michigan law requires that a person with a disability or handicap requiring accommodation to perform the essential duties of the job must notify the employer in writing within 182 days of the date that the need is known or should have been known. Federal law has no such requirement.

Position Applied For: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Date You Can Start:

Please note that this application will only remain active for 3 months, after which the applicant would need to re-apply.

Name \_\_\_\_\_  
Last First Middle

Social Security #: \_\_\_\_\_

Present Address: \_\_\_\_\_  
Street City State Zip

Telephone #: Home ( ) \_\_\_\_\_  
Cell ( ) \_\_\_\_\_  
Work ( ) \_\_\_\_\_

Are you 18 years or older? Yes \_\_\_\_\_ No \_\_\_\_\_

Are there any hours or days of the week you cannot work? \_\_\_\_\_

If so, when? \_\_\_\_\_

Type of Employment: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_

Salary/Wage Desired \_\_\_\_\_

Have you ever applied to this Township before? \_\_\_\_\_

Where? \_\_\_\_\_

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Under what name? \_\_\_\_\_

When? \_\_\_\_\_

**EDUCATION:**

	Name of School	Years attended	Graduate?	Subject/Major
Elementary				
High School				
College				
Specialized Training				

Do you have a US Military experience? \_\_\_\_\_ Date Entered \_\_\_\_\_

Branch: \_\_\_\_\_ Rank: \_\_\_\_\_ Date Discharged \_\_\_\_\_ Honorably? \_\_\_\_\_

Are you lawfully entitled to be employed in the United States? \_\_\_\_\_

Have you ever been convicted of a crime except minor traffic violations? Yes \_\_\_\_\_ No \_\_\_\_\_

Please provide any additional information such as special skills, training, management experience, equipment operation or qualifications you feel would be helpful to us in considering your application.

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

References: Three individuals not related to you, whom you have known for at least one year.

NAME	ADDRESS/PHONE	RELATIONSHIP	YEARS AQUAINTED

**Emergency Contact:**

\_\_\_\_\_  
Name Address Phone

**CURRENT AND MOST RECENT FORMER EMPLOYERS: (Most Recent One First)**

Date/Month/Year	Name/Address Phone	Salary: Starting/Ending	Last Position/ Responsibilities	Reason for Leaving
From:  To:				
From:  To:				
From:  To:				

May we contact the Employers listed? Yes \_\_\_\_\_ No \_\_\_\_\_

If not, which one(s)? \_\_\_\_\_

Please read the following statement carefully before signing to indicate you understanding:

I understand that, prior to being offered employment; I may be requested to take an employment examination. In the event that I have a disability that will affect my ability to take the test, I will so inform the Township prior to the administration of the test so that a reasonable accommodation can be made. The Township reserves the right to require medical documentation regarding the need for accommodation.

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed; falsified statements or omitted information on this application may result in termination.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated with or without cause, at any time, with or without notice.

I authorize investigation of all statements contained in this application for any employment related purpose. I release the listed references and all employers, except those specifically accepted,\* to provide you with any and all applicable information they may have. I hereby release these references and former employers from all liability for any information they may give to you.

As a condition of employment, employees of the Township agree not to commence any action, claim, or suit relating to their employment with the Township more than 182 calendar days after the date of the employee knew or should have known that a claim existed or later than the applicable limitations period established by statute whichever is less.

\_\_\_\_\_   
Date

\_\_\_\_\_   
Signature

\*Employers specifically accepted: \_\_\_\_\_

**For Employer Use Only**

Interviewed By: \_\_\_\_\_ Date: \_\_\_\_\_ Hired: Yes \_\_\_\_\_ No \_\_\_\_\_

Starting Date: \_\_\_\_\_ Position: \_\_\_\_\_

Wage: \_\_\_\_\_