



COMMUNITY ACTION AGENCY OF BUTTE COUNTY, INC.

2255 Del Oro Avenue; Oroville, California 95965 (530) 538-7559 FAX (530) 533-7470

INSTRUCTIONS TO APPLICANTS FOR THE POSITION OF:

Controller

Salary Range

Range 113 (\$46,344- \$59,428)

Open until sufficient application received

IMPORTANT INFORMATION, PLEASE READ CAREFULLY!

AGENCY APPLICATION:

Complete all pages of the application. Your signature is required. Do NOT use "See Resume" for any of the requested information. **Failure to provide any of the required information will result in the rejection of your application**

COVER LETTER (REQUIRED)

RESUME and LETTERS OF RECOMMENDATION (REQUIRED)

Current resume and letters of recommendation may be included.

JOB RELATED TRANSCRIPTS OR CERTIFICATES ARE (REQUIRED)

PLEASE SUBMIT APPLICATION PACKET IN THE FOLLOWING ORDER:

1. Cover Letter (required)
2. Agency Application (required)
3. Resume (required)
4. Letters of Recommendation (required)
5. Job related transcripts or certificates (required)
6. Affirmative Action Questionnaire (optional)

PLEASE NOTE THAT IT IS YOUR RESPONSIBILITY TO PROVIDE ALL COPIES OF DOCUMENTS YOU ARE SUBMITTING. **THE COMMUNITY ACTION AGENCY DOES NOT MAKE COPIES FOR APPLICANTS.**

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

Application packets may be hand-delivered, faxed or mail to:

***Community Action Agency of Butte Co., Inc.
2255 Del Oro Avenue
Oroville, CA 95965.***

CONTROLLER

DEFINITION

Under general direction, to plan, organize, and direct the financial duties and functions of the Community Action Agency; to oversee and direct accounting analysis, auditing, and budget administration; to provide supervision and training for fiscal staff; to represent the Agency with other organizations and government agencies; and to do related work as required.

DISTINGUISHING CHARACTERISTICS

This is an exempt, management class for managing and directing the financial duties and functions of the Community Action Agency. The incumbent also performs a variety of complex fiscal and budget administration and analysis assignments.

CLASSIFICATIONS SUPERVISED

Accountant I, II, Account Clerk I, II, Payroll Technician, Purchasing Specialist, and other positions, as assigned.

EXAMPLES OF IMPORTANT AND ESSENTIAL DUTIES *(The following is used as a partial description and is not restrictive as to duties required.)*

- Plans, organizes, manages, and coordinates the financial functions of the Community Action Agency;
- Supervises, trains, and evaluates the work of financial support staff;
- Develops, directs, and administers a variety of financial services, including but not limited to budgeting, revenue projections, payroll, tax accounting, general accounting, and cash receipt and disbursement;
- Directs and coordinates the development of financial and office policies, such as accounting standards, accounting controls, work schedules, workload distribution, travel reimbursement, and budget forms;
- Performs complex financial analysis work;
- Develops and implements financial record keeping methods and procedures;
- Works with Agency management to provide advice and consultation on budget procedures and expenditures;
- Compiles and prepares the annual Agency budget;
- Oversees and assists with balancing journals and general ledgers;
- Develops and coordinates the implementation of cost tracking systems, including maintaining information for Grant Mandated expenditure tracking;
- Coordinates the preparation of government tax reports for Agency 403(b) Retirement Plan;
- Responsible for Agency-related insurance plans;
- Keeps abreast of legislative changes and legal issues involving Agency financial management;
- Oversees the development, preparation, and submission of financial statements and reports;
- Provides advice on financial code and law changes to other staff;
- Represents the Agency with the public, boards, commissions, and representatives of granting and donor organizations, as delegated.

TYPICAL PHYSICAL REQUIREMENTS

Sit for extended periods; frequently stand and walk; normal manual dexterity and eye-hand coordination; lift and move objects weighing up to 25 lbs.; corrected hearing and vision to normal range; verbal communication; close vision required over significant periods of time to read, punctuate and proof complex financial reports; use of office equipment, including computer, telephone, calculator, copiers, and FAX.

TYPICAL WORKING CONDITIONS

Work is performed in an office environment; continuous contact with other staff.

MINIMUM QUALIFICATIONS

Knowledge of:

- Operations, policies, procedures, and legal requirements of the Community Action Agency of Butte County.
- General accounting theory, principles, and practices and their application to a variety of accounting transactions and problems.
- Laws, rules, regulations, and policies affecting the financial operations, financial transactions, and payroll system of the Agency.
- Non-profit agency cost accounting and budgeting.
- Fiscal and program auditing theory, principles, and techniques and their application to Agency financial functions.
- Payroll laws and administration.
- Principles of account classification.
- Budget development and control.

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MINIMUM QUALIFICATIONS (cont.)

- Computerized financial management systems and payroll systems.
- Principles of supervision, training, work evaluation, and management.

Ability to:

- Plan, direct, coordinate, and manage the fiscal functions of the Community Action Agency of Butte County, Inc.
- Perform a variety of complex accounting, auditing, and financial transaction work.
- Analyze and evaluate financial, program, and operational information, researching and gathering appropriate information to resolve problems.
- Provide supervision, training, and work evaluation for assigned staff.
- Monitor and update fiscal, operational, and program records.

Ability to: (continued)

- Develop objective analyses and recommendations for use by Agency management.
- Oversee the preparation and prepare a variety of financial and audit reports and statements.
- Gather, organize, analyze, and present a variety of information.
- Make mathematical calculations quickly and accurately.
- Assist with the development and utilization of computerized financial management system and payroll systems.
- Effectively represent the Agency with staff, boards and commissions, the public, and representatives of donor and grant agencies.
- Establish and maintain cooperative working relationships.
- Review A/P input for validity of payment and correct general ledger postings
- Review payroll for correctness.
- Read, punctuate and proof complex financial reports.
- Quickly learn new and complicated accounting related programs.
- Maintain confidentiality.
- Handle multiple projects with various deadlines.

Training and Experience:

Any combination of training and experience which would likely provide the required knowledge and abilities is qualifying. A typical way to obtain the required knowledge and abilities would be:

Broad and extensive professional work experience in accounting, auditing, and financial analysis work, including experience with non-profit agency financial administration, and preferably including at least two years in a lead or supervisory capacity.

Education equivalent to successful completion of courses required for a major in accounting at an accredited four (4) year college or university, or successful completion of a professional accounting curriculum which included courses in elementary and advanced accounting, auditing, cost accounting, and business law.

Special Requirements:

Possession of a valid and appropriate valid California Driver's License.

CERTIFICATION:

I certify that I have read and understand the duties and responsibilities of my job description as outlined above.

(Employee's Signature)

(Date)

Community Action Agency of Butte County, Inc. personnel are employed on an at-will basis. Employment at-will may be terminated with or without cause and with or without notice at any time by the employee or the Agency.

Original to Personnel File, copy to employee



COMMUNITY ACTION AGENCY OF BUTTE COUNTY, INC.

2255 Del Oro Avenue; Oroville, California 95965 (530) 538-7559 FAX (530) 533-7470

EMPLOYMENT APPLICATION

So that you will receive full consideration for employment opportunities at Community Action Agency of Butte Co., Inc. please be certain to fill in all the spaces on the agency's application form. If any information is missing, your application may be rejected.

APPLYING FOR THE POSITION OF: _____

NAME: _____
FIRST MIDDLE LAST

OTHER NAMES USED: _____

PHONE: () MESSAGE PHONE: () SOC. SEC. NO.: _____

ADDRESS _____
PRESENT STREET/MAILING ADDRESS CITY STATE ZIP CODE

DRIVER'S LICENSE NUMBER: _____ CLASS _____ EXPIRATION DATE _____

EMPLOYMENT ELIGIBILITY VERIFICATION:

Can you, after employment, submit verification of your legal right to work in the United States? YES () NO ()

LIST ANY RELATIVE NOW WORKING FOR THIS AGENCY (Please attach additional sheets if necessary): NOT APPLICABLE ()

NAME: _____ RELATIONSHIP: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A MINOR TRAFFIC VIOLATION? YES () NO ()

If you answered YES to the above question use the space below to explain. You may attach an additional sheet if necessary.

EDUCATION/TRAINING

PLEASE READ THE MINIMUM QUALIFICATIONS SECTION ON THE JOB DESCRIPTION BEFORE FILLING OUT THIS SECTION. Please list specifics that qualify you for the position for which you are applying. Failure to list required qualifications will eliminate you from consideration.

School	Name and Location	Years Completed	Did you Graduate?	Major	List Degree/Diploma
High School					
College or University					
Vocational, Trade, or Business					

LICENSES/CERTIFICATES (ATTACH DOCUMENTATION):

EXPERIENCE/ EMPLOYMENT HISTORY- PROVIDE PAST TEN YEARS (OR MORE) PREVIOUS EMPLOYMENT HISTORY (FULL-TIME, PART-TIME, PAID OR UNPAID/VOLUNTEER) PERTINENT TO THE POSITION FOR WHICH YOU ARE APPLYING. **DO NOT USE "SEE RESUME" FOR ANY OF THE REQUESTED INFORMATION ON THIS FORM.** RESUMES MAY BE ATTACHED, BUT THEY WILL NOT BE ACCEPTED IN PLACE OF A PROPERLY COMPLETED CAABCI EMPLOYMENT APPLICATION FORM. ACCOUNT FOR ALL PERIODS (THREE MONTHS OR MORE) OF UNEMPLOYMENT. PLEASE ATTACH ADDITIONAL SHEETS IF NEEDED.

FROM:(MM/DD/YY) TO (MM/DD/YY) _____ TOTAL: _____ YR. _____ MO. HOURS PER WEEK:	JOB TITLE:	EMPLOYER NAME	PHONE NUMBER ()
	SUPERVISOR'S NAME/TITLE	ADDRESS	
	SALARY \$ PER	NO. SUPERVISED	REASON FOR LEAVING

DUTIES: _____

IF YOU ARE CURRENTLY EMPLOYED, MAY WE CONTACT YOUR PRESENT EMPLOYER? YES () NO ()

FROM: (MO./YR.) TO: (MO./YR.) _____ TOTAL: _____ YR. _____ MO. HOURS PER WEEK:	JOB TITLE:	EMPLOYER NAME /PHONE NUMBER ()
	SUPERVISOR'S NAME/TITLE	ADDRESS
	SALARY \$ PER	NO. SUPERVISED

DUTIES: _____

FROM: (MO./YR.) TO: (MO./YR.) _____ TOTAL: _____ YR. _____ MO. HOURS PER WEEK:	JOB TITLE:	EMPLOYER NAME /PHONE NUMBER ()
	SUPERVISOR'S NAME/TITLE	ADDRESS
	SALARY \$ PER	NO. SUPERVISED

DUTIES: _____

LIST ANY FOREIGN LANGUAGE YOU SPEAK _____ WRITE _____

WILL YOU BE ABLE TO PERFORM THE ESSENTIAL JOB FUNCTIONS WITH OR WITHOUT REASONABLE ACCOMMODATIONS? YES () NO ()

REFERENCES: LIST BELOW THREE PERSONS NOT RELATED TO YOU WHO HAVE KNOWLEDGE OF YOUR WORK PERFORMANCE WITHIN THE LAST 3 YEARS. PROFESSIONAL REFERENCES ARE PREFERABLE.

NAME	ADDRESS	PHONE	OCCUPATION	YRS KNOWN

Please state any previous experiences that qualify you for the position for which you are applying. _____

I HEREBY CERTIFY that all statements made in connection with this application are true and correct to the best of my knowledge and belief. I understand that any false or misleading information is grounds for disqualification for further consideration for employment and/or immediate termination of employment if discovered at a later date. I authorize investigation of all statements contained herein. I further authorize the references and employers listed above to give you any and all pertinent information concerning my previous employment, personal or otherwise. I release all parties from liability for any damage that may result from furnishing the same to you. **I understand that Community Action Agency of Butte Co., Inc. is an at-will employer.**

Applicant's Signature Required

Date

COMMUNITY ACTION AGENCY OF BUTTE COUNTY, INC.
AFFIRMATIVE ACTION QUESTIONNAIRE

To aid the Community Action Agency in its commitment to Equal Employment Opportunity, we ask applicants to voluntarily provide the following information on this form in order to comply with federal Equal Employment Opportunity law requirements. Your cooperation in providing this information is essential to the success of the research and evaluation program. This information is solicited on a voluntary basis and will **not** be used to make any decision about your eligibility, selection, or employment. This information will be separated from the application and will only be available to authorized personnel, and only for research and statistical purposes. It will **not** have any effect upon your application..

Position Applied For: _____

Name: _____
Last First Middle

Where did you hear about the job? _____

Please check the following applicable lines:

Gender

Veteran

Female _____ Male _____

Disabled _____ Vietnam Era _____

Other _____

Ethnic Origin: The following ethnic categories have been identified by the Equal Employment Opportunity Commission (EEOC). Please check one space only for the ethnic category you most closely identify with.

African American _____

*American Indian _____

Caucasian _____

Asian or Pacific Islander _____

Filipino _____

Latin American/Latino _____

Hispanic _____

Must be Federally enrolled and / or have recognized tribe designation, or in the process of doing so.