EMPLOYEE NAME: ___________________________

Revised: 6/97; 1/98; 9/00; 9/01; 1/04; 6/04; 6/05; 3/06; 6/06; 3/09; 3/11; 10/12; 6/18

JOBS DESCRIPTION

POSITION TITLE: Capital Projects Specialist
JOB CODE: 474B

DIVISION: Financial Services
SALARY SCHEDULE: Annual Office Clerical/Technician

DEPARTMENT: Capital Project Accounting & Accounts Payable
WORK DAYS: 238

REPORTS TO: Manager, Capital Project Accounting & Accounts Payable
PAY GRADE: Rank VII (NCT7)

FLSA: Non-Exempt
PAY FREQUENCY: Monthly

PRIMARY FUNCTION: Performs budget and/or accounting support for departments and schools with active capital outlay projects.

REQUIREMENTS:

1. Educational Level: High School Diploma or GED required; Associate Degree in Business or Accounting preferred
2. Certification/License Required: None
3. Experience: 3 years of specialized experience in accounting
4. Physical Activities: Routine physical activities that are required to fulfill job responsibilities
5. Knowledge, Skills, & Abilities: Written and oral communication; word processing, spreadsheet, math aptitude

The Board of Education and the Superintendent may accept alternatives to some of the above requirements.

ESSENTIAL DUTIES:

1. Demonstrates prompt and regular attendance.
2. Monitors budgets for all capital outlay projects and requests budget transfers as needed. Prepares, processes and indexes all capital outlay fund budget adjustments.
3. Processes encumbrance transactions and pay requests for all construction projects.
4. Establishes budgets for all new capital projects. Monitors and processes close-outs for all completed projects.
5. Monitors State Capital Outlay revenues and requests reimbursements for state funded capital projects.
7. Organizes and maintains list of land purchases/sales and processes all payments for land.
10. Assists Capital Projects Finance Manager with Building and Land Fixed Asset Inventory and year end Construction-in-Progress tracking.
11. Maintains construction project accounting files and oversees scanning process.
12. Performs other duties as assigned by appropriate administrator.

Signature of Employee ___________________________ Date ______________________

Signature of Supervisor ___________________________ Date ______________________