JOB DESCRIPTION

POSITION TITLE: Capital Projects Technician

JOB CODE: 474C

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 VI (NC06)

FLSA: Non-Exempt

PAY FREQUENCY: Monthly

PRIMARY FUNCTION: Performs bookkeeping and accounting duties pertaining to the operation of Capital Projects.

REQUIREMENTS:

1. Educational Level: High School Diploma or GED required
2. Certification/License Required: None
3. Experience: 2-5 years accounting experience
4. Physical Activities: Routine physical activities that are required to fulfill job responsibilities
5. Knowledge, Skills, & Abilities: Written and oral communication; word processing, bookkeeping/financial record keeping, spreadsheet

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. Distributes administrative capital outlay reports and posts reports to intranet.
3. Posts all budget adjustments and notes to the Financial System; prepares and distributes charts of accounts.
4. Researches and tracks all donated building and land assets; posts to the fixed asset system.
5. Creates and maintains project accounting files for all technology and safety/support items.
6. Coordinates office equipment maintenance, supply orders, phones calls, mail distribution, and record retention.
7. Scans and indexes all capital outlay fund payments.
8. Provides support to Capital Project Specialists and all District bookkeepers.
9. Processes encumbrance transactions and pay requisitions for all non-construction activities.
10. Assists in reconciliation of financial service records, capital projects reports, and intranet queries.
11. Maintains departmental schedule for meetings and staff development; responsible for staff meeting minutes.
12. Performs other duties as assigned by appropriate administrator.

Signature of Employee __________________________________________ Date ____________________

Signature of Supervisor _________________________________________ Date ____________________