JOB DESCRIPTION

POSITION TITLE: Lead Payroll Technician, Transportation

DIVISION: Operational Support

DEPARTMENT: Transportation Services

REPORTS TO: Executive Director of Transportation

FLSA: Non-Exempt

PAY GRADE: Rank V (NC05)

PAY FREQUENCY: Monthly

PRIMARY FUNCTION: Performs, maintains and oversee all payroll functions for the Transportation Department.

REQUIREMENTS:

1. Educational Level: High School Education or GED required; Bachelor’s degree preferred
2. Certification/License Required: None
3. Experience: 2 years of routine clerical experience
4. Physical Activities: Routine physical activities that are required to fulfill job responsibilities
5. Knowledge, Skills, & Abilities: Written and oral communication, data entry, Microsoft programs and school district software applications

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

ESSENTIAL DUTIES:

1. Demonstrates prompt and regular attendance; work hours may vary during the school year for closings.
2. Submits all data for bi-weekly and monthly payroll for over 1,000 employees to include leave, time adjustments, and supplemental pay.
3. Manages departmental software of time entry and employee database.
4. Oversees and coordinates all staff responsible for payroll entry and time review.
5. Submits and tracks FMLA requests.
6. Trains all employees on payroll policies and procedures and updates staff handbook on policies as needed.
7. Creates, generates and monitors payroll reports from departmental software, CTMS and Munis software.
8. Stays abreast of federal, state and district payroll policies and procedures to serve as the point of contact regarding payroll for Transportation employees.
9. Works closely with district level payroll department to recommend, develop and provide input on payroll procedures and guidelines.
10. Provides customer support to all Transportation employees.
11. Performs other duties as assigned by appropriate administrator.

Signature of Employee____________________________________ Date __________________________

Signature of Supervisor ____________________________________ Date __________________________