

The Town of Merrimac is seeking energetic part-time Assistant Town Accountant to work under supervision of Town Accountant. Successful candidate must demonstrate excellent communication, interpersonal, analytical, and self-management skills.

19.5 hours/week at \$27.04/hour

Full description available on the town's website: www.townofmerrimac.com/employment-opportunities.

Send applications, cover letters, and resumes to Anne Jim at ajim@townofmerrimac.com.

ASSISTANT TOWN ACCOUNTANT

Position Purpose:

The purpose of this position is to provide the Town Accountant with assistance to perform and manage the development, operation and maintenance of financial information and internal control systems for the town in conformance with Massachusetts Statutes and town Bylaws and accounting standards promulgated by the Bureau of Accounts. Performs all work as required under supervision of the Town Accountant.

Supervision:

Supervision Received: Works under the general direction of the Town Accountant and in accordance with applicable Massachusetts General Laws, town policies, town bylaws, and relevant state, federal and local regulations and standards.

Supervision Given: None.

Job Environment:

Work is performed under typical quiet office conditions; work environment is moderately noisy.

Operates a variety of office equipment, such as a laptop computer system, calculator, Voice-Over Internet Protocol phone system, and copier.

Has seldom contact with the public; frequent contacts with town department personnel, vendors and Massachusetts field representatives and attorneys. Contact is by telephone, in person, written correspondence and personal meetings. Contacts involve furnishing information and to assist in resolving questions or concerns pertaining to the financial operation of the town.

Has access to department confidential information.

Errors could result in significant confusion and delay, loss of division services, and have serious financial repercussions; errors could cause exposure for the town to certain legal liabilities.

Essential Functions:

(The essential functions or duties listed below are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related or a logical assignment to the position.)

Performs with supervision, accounting operations ensuring compliance with Massachusetts General Laws; reconciling, closing and filing regulatory reports with the Commonwealth.

Assists with review of bi-weekly vendor and payroll warrants confirming validity of expenditures against appropriations. Enters invoices for payment and assists with reviews of invoices entered by departments.

Evaluates accounting requirements during discovery meetings, avoiding misstatements and fostering transparency in operations.

Assists with internal audits, verifying accuracy of General Ledger; prepares journal entries into computerized system.

Gathers and organizes documents for annual audit.

Batches all warrant and receipt information into the computerized accounting system.

Generates monthly Appropriation/Expenditure Reports by department.

Additional point of contact regarding issues with telecommunications (landlines, cell phones), copiers, and office supplies.

Assists Town Accountant with various data entry of state reports: Schedule A, Tax Recapitulation, and Balance Sheet.

Enhances operational efficiency, trains users in accounting software and provides them secured access to enter vouchers, perform vendor/budget inquiries and generate reports.

Attends seminars and conferences to remain current on procedures.

Performs similar or related work as required, directed or as situation dictates.

Recommended Minimum Qualifications:

Education, Training and Experience:

Associate's degree in accounting or related field, plus practical knowledge of municipal accounting procedures and practices; familiarity with Mass. General Laws pertaining to municipal accounting.

Special Requirements:

Certified Government Accountant (CGA), preferred but not required

Knowledge, Ability and Skill:

Knowledge: Thorough knowledge of office procedures, state procurement laws, bookkeeping practices and budgetary functions; Knowledge of UMAS chart of accounts; Knowledge of the standard principles, procedures, records, and forms related to computerized accounting systems.

Ability: Ability to communicate effectively both verbally and in writing. Ability to maintain complex financial records and to provide information and prepare reports from such records, especially computer reports. Ability to gather data, compile information and prepare reports. Ability to analyze and solve problems and to manage/organize multiple tasks in an efficient manner. Ability to interact effectively with all individuals.

Skill: Excellent planning and organizational skills. Specialized skills in utilizing a variety of computer and accounting software systems to include MS Office. Excellent computer skills in utilizing personal computers, particularly with financial and spreadsheet applications.

Physical Requirements:

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions. Regularly required to walk, stand, sit, talk, and hear; operate objects, tools or controls; pick up paper, files, and other common office objects. Ability to view computer screens and work with details for extended periods of time. Ability to operate a keyboard and calculator at an efficient speed.

(This job description does not constitute an employment agreement between the employer and employee. It is used as a guide for personnel actions and is subject to change by the employer as the needs of the employer and requirements of the job change.)

APPLICATION FOR EMPLOYMENT

Town of Merrimac
4 School Street
Merrimac, MA 01860
978-346-8862



We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
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How Did You Learn About Us?

<input type="checkbox"/> Advertisement <i>Publication Name/Date</i> _____	<input type="checkbox"/> Friend	<input type="checkbox"/> Inquiry	<input type="checkbox"/> Referral <i>Employee Name</i> _____
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____	

Last Name	First Name	Middle Name
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Address	Number	Street	City	State	Zip Code
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Telephone Number(s)	Electronic Mail Address	Social Security Number
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Best time to contact you at home is: _____: _____ AM / PM

If you are under 18 years of age, can you provide required proof of eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

If Yes, give date ____ / ____ / ____

Have you ever been employed with us before? Yes No

If Yes, give date ____ / ____ / ____

Do any of your friends or relatives, other than spouse, work here? Yes No

If Yes, stated name, relationship and location _____

Are you currently employed? Yes No

May we contact you present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

Proof of citizenship or immigration status will be required upon employment.

Date available for work ____ / ____ / ____ What is your desired salary range? _____

Are you available to work: Full Time

Part Time (Please indicate Mornings Afternoon Evenings)

Temporary (Please indicate dates available ____ / ____ thru ____ / ____)

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Applicants for positions which require daily use of company vehicles must provide a current Department of Motor Vehicles driving record upon application for employment. Bowers & Associates, Ltd. will reimburse the applicant for the associated cost. A copy of your valid drivers license must be attached for field survey positions.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

School	Name and Address of School	Course of Study	Years Completed	Diploma/ Degree
High School				
Undergraduate College				<i>(attached copy of school transcript required)</i>
Graduate/ Professional				<i>(attached copy of school transcript required)</i>
Other (Specify)				

WORK EXPERIENCE

Start with you present or lost job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/ Salary		
Starting/Present Job Title	Starting	Final	
Supervisor			
Reason for Leaving			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer ¹	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/ Salary		
Starting/Present Job Title	Starting	Final	
Supervisor			
Reason for Leaving			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/ Salary		
Starting/Present Job Title	Starting	Final	
Supervisor			
Reason for Leaving			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/ Salary		
Starting/Present Job Title	Starting	Final	
Supervisor			
Reason for Leaving			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Comments: Include explanation of any gaps in employment.

Describe any specialized training, apprenticeship, skills and extra circular activities.

Describe any job-related training received in the United States Military.

List professional, trade, business or civic activities and offices held.

You may exclude membership which reveal gender, race, religion, national origin, age, ancestry, disability or other product status.

ADDITIONAL INFORMATION

Other Qualifications: Summarize special job-related skills and qualifications acquired from employment or other experience.

SPECIALIZED SKILLS (Skills/ Equipment Operated)

GENERAL / ADMINISTRATIVE

- Terminal
- PC/ MAC
- Copier
- Facsimile
- Scanner
- Spreadsheets
- Word Processing
- Typing [WPM _____]

ENGINEERING / SURVEYING

- Plotter
- Total Station
- Level
- Data Collector

OTHER (list)

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. Yes No

PERSONAL/ PROFESSIONAL REFERENCES Do not include family members or past supervisors.

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed forty-five days. Any application wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

Signature of Applicant

Date

Please note that Applications for Employment received from potential employees via electronic mail must be authorized with an original signature during the interview process.

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