

POSITION DESCRIPTION

Read each heading carefully before proceeding. Make statements simple, brief, and complete. Be certain the form is signed. Supervisors and incumbents are responsible for the completion of this form.

CHECK ONE: NEW POSITION EXISTING POSITION (allocated)

PART I - Position Information. Items 1 through 12 to be completed by department.

1. Agency Name: Kansas State University

2. Employee Name: (leave blank if position is vacant)
VACANT

3. Division: Student Services

4. Section: Lafene Health Center

5. Unit: Business Office

6. Location: (address where employee works)
City Manhattan County Riley

7. Circle appropriate time. 50%
Full time Part time

School:
Limited Term ending date:

8. Regular hours of work: (enter appropriate time)
From: AM/PM To: AM/PM or VARIABLE
1:00 5:00

9. Position Number:
W00058256

10. Department Number: 3670009270

11. Present Class Title (if existing position)
Senior Administrative Specialist Assistant

12. Proposed Class Title

HUMAN RESOURCES	13. Allocation: <u>General Administration Assistant</u> Supervisory Status: <u>yes/no</u> FLSA Code: <u>nonexempt/exempt</u>
	14. Effective Date: <u>9/28/09</u>
	15. By: <u>[Signature]</u> Approved: <u>[Signature]</u>
	16. Audit(s): Date: _____ By: _____ Date: _____ By: _____
	17. Position Review(s) Date: _____ Date: _____ Date: _____ Date: _____

PART II - Organizational Information. To be completed by department head or supervisor of the position.

18. a) Briefly describe why this position exists. (Include how the position relates to the purpose, goal, or mission of the unit.)
Accounts Payable Specialist
- b) If this is a request to reallocate a position, briefly describe the reorganization, reassignment of work, new function added by law or other factors which changed the duties and responsibilities of the position.

19. Who is the supervisor of the incumbent in this position? (Who assigns work, gives directions, answers questions and evaluates.)

Name	Title	Position Number
<u>Shecky Davis</u>	<u>Director of Administrative Services</u>	<u>W0037745</u>

List other individuals who may provide input for evaluation purposes.

Name	Title	Position Number
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20. a) How much latitude is employee allowed in completing the work? b) What kinds of instructions, methods and guidelines are given to the employee in this position to help do the work? c) State how and in what detail assignments are made.

Latitude is given to determine priority(s) of duties and implementation within a framework of deadlines to include daily, weekly, monthly, and fiscal year end. Written and or oral instructions given at the beginning of a new task with periodic review. Guidelines and deadlines should comply with PPM, State Contracts, Purchasing Circulars, Medical Manager, and DC on-line system outlines used as references.

21. Describe the work of this position using this page and/or one additional page only. (Please use the following format to create task statements for actual job duties.)

What is the action being done (use an action verb): to **whom or what** is the action directed (object of action): **why** is the action being done (describe the result or outcome expected): ***how** is the action expected to be performed (describe the manner, methods, techniques or procedures in which the task is currently performed). For each task, state: who reviews it? How often? What is it reviewed for?

Number each task and indicate percent of time and identify each function as essential or marginal by placing an E or M next to the percent of time for each task. Essential functions are the primary job duties for which the position was created and that an employee must be able to perform with or without reasonable accommodation. A marginal function is a peripheral, incidental or minimal part of the position or one that can be performed with assistance or by another individual. **OFFICIAL DETERMINATIONS ARE MADE BY CLASSIFICATION SERVICES.**

*The description of how the work is to be performed does not preclude the consideration of reasonable accommodation(s) for qualified persons with a disability.

No.	%	E or M	
1.	85%	E	<i>Accounts Payable: Responsible for utilizing the computerized payment process using Agency Purchase Orders, and Interfunds, and letters of request for all expenditures with state and foundation funds by knowledge of Lafene, University, and State policies and procedures. Verifies accuracy of invoices, charging appropriate cost to departments within the Center within five working days of receipt of invoice. Assist in reconciliation of state funds, communicate and document with vendors on past due accounts and incorrect billings to settle discrepancies within the current month. Reserve sufficient funds and prepare encumbrance forms for fiscal year end after communicating with department directors within the center so that all invoices can be paid appropriately. Compiles data for APV listing, and maintains list of Departmental Billings including status. Prepares open commitment report twice a year.</i>
2.	10%	M	<i>Accounts Receivable: Responsible for billing on campus and off campus departments and companies on a monthly basis. Assisting in other areas of Accounts Receivable when necessary to assure minimal wait by patients and when shortage of staff. Must be knowledgeable of Medical Manager and E-forms for campus system in order to properly access student accounts, delinquencies, permanent address, and make changes to student records.</i>
5.	5%	M	<i>Other duties to include but not limited to: Processing and receiving printing orders for departments within the Center. Places maintenance calls on office and technical equipment. Key operator for copy machines in administration, business office, clinic areas, medical records, and sports medicine this includes monthly reporting of meter readings. Back up cashier for Business office. Back up clerk for mail distribution.</i>

Duties are reviewed in order to obtain desired results.

22. a) If work involves leadership, supervisory, or management responsibilities, check the statement that best describes the position.
- Lead worker: Assigns, trains, schedules, or oversees work of others.
 - Supervisor: Plans, staffs, evaluates, and directs work of employees of a work unit.
 - Manager: Delegates authority to carry out work of a unit to subordinate supervisors or managers.
- b) List the class titles, position numbers of all persons who are directly supervised and evaluated by employee in this position.

Title

Position Number

Supervise one student worker

23. Which statement best describes the results of error in action or decision of this employee?
- Minimal property damage, minor disruption of the flow of work.
 - Moderate loss of time, injury, damage, or adverse impact on health and welfare of others.
 - Major program failure, major property loss, or serious injury or incapacitation.
 - Loss of life, disruption of operations of a major agency.

Please give examples and describe consequences of action.

Overpayment could be made to vendors if invoices are not reviewed accurately and processed in a timely manner to avoid late charges.

Loss of inventory may not be detected if an accurate inventory listing is not maintained and submitted for department director's approval.

24. For what purpose, with whom and how frequently are contacts made with the public, other employees or officials?

Contacts are made with the following people on a daily/weekly basis:

Campus accounting and purchasing offices - Processing payment vouchers, encumbrances, and placing orders for equipment.

University departments - Questions about charges and account status.

Lafene Health Center Staff - Placing orders for supplies and equipment.

Students and parents - Questions about charges, payments, and account status.

Off campus businesses and vendors - Placing orders, problems with billing, maintenance calls on equipment.

25. a) What hazards, risks or discomforts exist on the job or in the work environment?

Eye and back strain can be caused by long periods of time at a computer. Transporting packages, freight, and supplies.

- b) Describe any methods, techniques, procedures or equipment that must be used to ensure safety for equipment, employees, clients and others.

Quarterly safety inspections are conducted to notify supervisor of hazards in the area. Annual refresher course on safety manual is conducted along with quarterly fire drills.

26. List machines or equipment or equipment used regularly in the work of this position. Indicate the frequency with which each is used.

Daily use of the following equipment: PC; telephone; calculator; cash register; copier; credit card machine; fax machine; printer.

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PART III - Education, Experience and Physical Requirements Information.

27. MINIMUM REQUIREMENTS as stated in the State of Kansas Class Specification. (Job skills beyond state specifications should be entered in #29.) *One year of experience in general office, clerical and administrative support work. Education may be substituted for experience as determined relevant.*
Independent work experience in office support/clerical work by the agency.

28. NECESSARY SPECIAL REQUIREMENTS

a) List any licenses, registrations or certifications for this position that are required to perform the essential functions of the position.

b) Describe the physical requirements of the job as they relate to essential functions (focus on results, not methods of obtaining results).

Position requires moderate physical exertion.

29. PREFERRED QUALIFICATIONS AND SKILLS

a) List preferred education or experience that may be used to screen applicants.

High School diploma or GED with courses in bookkeeping and/or accounting, computer skills to include data entry, Microsoft Office products, Wordperfect and Windows.

b) List preferred special knowledge, skills and abilities.

Knowledge of basic accounting principles, practices and standards. Must possess excellent public relations skills. Must have excellent oral and written skills.

30. BONA FIDE OCCUPATIONAL QUALIFICATION (BFOQ)

State additional qualifications for this position that are necessary as a bona fide occupational qualification (BFOQ).