



Torrance County

Job Description

Job Title: Treasury Controller

Department: Treasurer

Reports Directly to: County Treasurer

We conform to all the laws, statutes, and regulations concerning equal employment opportunities and affirmative action. We strongly encourage women, minorities, individuals with disabilities and veterans to apply to all of our job openings. We are an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, gender, sexual orientation, gender identity, or national origin, age, disability status, Genetic information & Testing, Family & Medical Leave, Protected Veteran status, or any other characteristic protected by law. We prohibit retaliation against individuals who bring forth any complaint, orally or in writing, to the employer or the government, or against any individuals who assist or participate in the investigation of any complaint or otherwise oppose discrimination.

General Purpose:

Under general direction, performs professional and highly technical accounting work for the County; ensures compliance with governmental accounting standards board (GASB) and other generally accepted accounting principles (GAAP), ensures staff are in compliance with internal accounting controls, procedures, policies, and assignments within the department; provides oversight of all accounting function, investments, bank accounts, cash flows, revenues, property taxes, gross receipts, and other activities as assigned or directed; manages and coordinates audit activities as assigned or directed; manages and coordinates audit activity including the preparation of necessary schedules, audit responses, and public disclosures; prepares required administrative reports required by the NM Department of Finance and Administration, and all other reporting as mandated by local, state, and federal authorities; ensures the protection and physical security of all monies, including those on deposit with financial institutions, financial records, online financial activities, and maintenance of all user profiles. Permission, access and monitoring.

Responsibilities:

- Coaches, trains, and motivates assigned staff; coordinates and/or provides staff training; and manages the workflow and prioritization of projects; and measures the performance of the assigned unit/area and all related staff.
- Manages and oversees the tax collection and financial software in use by the Treasurer's Office including serving as first point of contact for the department; provides technical, educational, training, and full service support as need and required.

- Manages, monitors and oversees all accounting functions, such as the monthly Treasurer's Report, in addition to all investments, bank accounts, cash flows, revenues, property taxes, gross receipts, and other related activities.
- Makes any recommended changes in office methods and procedures to include accounting functions, collections, repossessions, and delinquent property sales or auctions, bank reconciliation, budgets and budgetary recommendations.
- Participates in the development and implementation of goals, objectives, policies and procedures for the office; collaborates, cooperates, and coordinates with other departments as needed to maintain cohesive functioning between County offices.
- Provides full customer service support and front line response to customer needs, complaints, and inquiries.
- Prepares required schedules, audit responses, public disclosures, and administrative reports required by local, state, and federal authorities.
- Substantiates financial transactions by auditing documents; Verifies fund / account balances and deposits; monitors bank accounts for erroneous charges and to verify deposits and withdrawals; balances daily distribution and reconciles bank statements for the monthly report.

Knowledge:

- Operational characteristics, services, and activities of a Treasury Office, including business/industry principles and practices related to work assigned.
- Public sector accounting principles and practices, including generally accepted account principles (GAAP).
- Computer hardware and automated accounting systems
- Techniques in data verification, data entry, and proper coding of documents.
- County and departmental policies and procedures.
- Cost, governmental, and fixed assets accounting.
- Financial record keeping practices.
- State statutes and administrative rules relevant to County level tax collection, financial reporting, and investments.
- Principles and practices of governmental budget preparation and administration.
- Principles of customer service and public relations.
- Research methods and report presentation.
- Advanced arithmetical computations adequate to correctly perform work.
- Effective communication principles and practices including oral and written communication; to include public relations and public speaking.
- Modern office procedures, methods, and equipment including computers, computer applications such as word processing, spreadsheets, and statistical databases.
- English usage, spelling, grammar, and punctuation.
- Principles of business letter writing.
- Principles of supervision, training, and reviewing daily work.

Skills:

- Administering assigned financial and accounting programs in a public-sector setting.
- Meeting deadlines, working with multiple projects, and coordinating the work of others.
- Operating automated accounting systems and general office equipment.
- Identifying and reporting discrepancies.
- Verifying and validating work of other staff.
- Analyzing and interpreting fiscal and accounting reports.

- Preparing informative and statistical reports.
- Computing rapid and accurate arithmetical computations.
- Gathering data and verifying information.
- Responding to inquiries or complaints from customers, regulatory agencies, audit firms, or members of the business community.
- Evaluating processes and procedures and making recommendations for improvement and cost-effectiveness.
- Working with equipment, tools and materials required in area of assignment.
- Communicating effectively verbally and in writing, including public relations and public speaking.
- Establishing and maintaining effective working relationships with employees, other agencies, and the public, including meeting and dealing tactfully with the public.
- Utilizing personal computer software programs and other relevant software affecting assigned work and in compiling and preparing spreadsheets.
- Interpreting and administering policies and procedures sufficient to administer, discuss resolve, and explain them.
- Supervising, leading, and delegating tasks.

Requirements:

- Associates Degree in Accounting, Business, Bookkeeping, or related field.
- Or Five (5) years banking, or bookkeeping experience.
- Or an equivalent combination of education and experience.
- Experience in tracking accounts, gathering various financial data
- General office administrative assistant experience, that includes creating and typing various correspondence and reports and maintaining records and files

The duties listed above 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 logical assignment to the position.

EMPLOYEE DECLARATION

I have read the above position specifications. I understand the demands and expectations of the position described and, to the best of my knowledge, believe I can perform these duties.

Printed Name

Signature

Date



TORRANCE COUNTY

P.O. Box 48 205 Ninth Street Estancia NM 87016
Phone (505) 246-4757 (505) 384-5294 Fax
www.torrancecountynm.org

APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, ancestry, age, marital or veteran status, or the presence of a medical condition or disability (unless a bona fide occupational qualification for position).

NAME - Last	First	Initial	Home Phone:	Work Phone:
ADDRESS - Street	Mailing		Cell Phone:	Email Address:
City	State	Zip Code	Please list any different name you have used for school or employment	

EACH POSITION YOU APPLY FOR REQUIRES A SEPARATE APPLICATION

POSITION APPLIED FOR - Give exact title.

1. Title	
2. Do you have a valid NM driver's license? Yes <input type="checkbox"/> No <input type="checkbox"/>	Number: _____ Commercial Driver's License?: Yes <input type="checkbox"/> No <input type="checkbox"/> Class: _____
3. Sheriff/Dispatch Applicants only: Have you been convicted of a felony or misdemeanor? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, explain and provide dates:	
4. Have you previously worked or do you now work for Torrance County? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide dates: Employment records for former and current County employees will be made available to hiring officials upon request.	
5. Does Torrance County employ any relative of yours? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, (1) Name: _____ (2) Name: _____ Relationship: _____ Relationship: _____	

INSTRUCTIONS FOR COMPLETING THIS APPLICATION

The completion of this application represents your ability to provide written communication and follow directions. Incomplete or illegible applications will not be processed.

Attach a copy of your diploma, degree or appropriate transcripts to each application.

Type or print in dark ink. Copies are acceptable if each is clear, has an original signature, correct job title and contains required attachments. **DO NOT** submit a résumé in lieu of this application. Read the employment announcement carefully for the position for which you are applying. Note the skills and knowledge required for the position and assure that you meet the minimum qualifications set forth on that announcement. Carefully complete each block of the Employment History section to fully describe your work or volunteer experience. Your qualification for a position will depend on your description of previous experience and its relevance to the position you are seeking.

NAME - Last		First	Initial
EDUCATION, LICENSES, CERTIFICATIONS Check (✓) and fill in appropriate areas		High School Graduate/GED Certificate? Yes No ATTACH A COPY OF DIPLOMA OR CERTIFICATE	
<input type="checkbox"/> Vocational/Technical	Hours Completed	<input type="checkbox"/> Business College	Hours Completed
<input type="checkbox"/> School - Major Field		<input type="checkbox"/> Major Field	

COLLEGE OR UNIVERSITY

UNDERGRADUATE		GRADUATE	
School(s)		School(s)	
Major Field(s)		Major Field(s)	
Degree Earned	Date of Degree	Degree Earned	Date of Degree

LICENSE OR CERTIFICATE

1. License/Certificate issued by				2. License/Certificate issued by			
Field/Trade Specialization	Number	Date Issued	Exp. Date	Field/Trade Specialization	Number	Date Issued	Exp. Date

NOTE: You MUST SUBMIT required documents (copy of transcript, license, and certificates) with each application.

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

SHERIFF AND/OR DISPATCH APPLICANTS ONLY

(applicants for the sheriff's department must be 21 years or older)

Are you age 21 or older? Yes No

Social Security Number _____ Driver's License Number _____ State _____

Are you willing to submit to a full background investigation? Yes No

Are you willing to submit to a drug and alcohol screening? Yes No

Are you willing to submit to psychological testing? Yes No

Are you willing to undergo various physical agility tests and submit to a full physical examination? Yes No

EMPLOYMENT HISTORY - A résumé will not be accepted in lieu of the employment application. Begin with current or most recent job or volunteer experience and work back. If more than one position has been held with the same employer, list each separately. Describe each different assignment in military service. Under "DUTIES" describe your job in sufficient detail so that we can determine not only your tasks, but the level of responsibilities.

MAT WE CONTACT THE EMPLOYERS LISTED BELOW? YES NO

If NO, explain:

1	Employer's Name	Kind of Business	From (Mo/Yr)	To (Mo/Yr)
Employer's Address		Street/Mailing		Supervisor's Name and Telephone Number
Your Job Title	Check (✓) one: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time		Current or Last Hourly Pay	
Hours per week: _____				\$
If you supervised employees, indicate number and give dates #	From (Mo/Yr)	To (Mo/Yr)	Place of employment (City and State) if different from employer's address	
Duties:				
				DO NOT WRITE IN THIS AREA
				YEARS MONTHS
Reason for Leaving:				

2	Employer's Name	Kind of Business	From (Mo/Yr)	To (Mo/Yr)
Employer's Address		Street/Mailing		Supervisor's Name and Telephone Number
Your Job Title	Check (✓) one: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time		Current or Last Hourly Pay	
Hours per week: _____				\$
If you supervised employees, indicate number and give dates #	From (Mo/Yr)	To (Mo/Yr)	Place of employment (City and State) if different from employer's address	
Duties:				
				DO NOT WRITE IN THIS AREA
				YEARS MONTHS
Reason for Leaving:				

3	Employer's Name	Kind of Business	From (Mo/Yr)	To (Mo/Yr)
Employer's Address		Street/Mailing		Supervisor's Name and Telephone Number
Your Job Title	Check (✓) one: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time		Current or Last Hourly Pay	
Hours per week: _____				\$
If you supervised employees, indicate number and give dates #	From (Mo/Yr)	To (Mo/Yr)	Place of employment (City and State) if different from employer's address	
Duties:				
				DO NOT WRITE IN THIS AREA
				YEARS MONTHS
Reason for Leaving:				

FOR ADDITIONAL EMPLOYMENT HISTORY USE SUPPLEMENTAL SHEET

List three professional references (Other than former employers or relatives) List only those you will permit us to contact.

NAME	ADDRESS	PHONE	PROFESSIONAL RELATIONSHIP
1.			
2.			
3			

SIGNATURE - Please read before signing

I hereby certify that this application contains no willful misrepresentation(s); and that should any investigation disclose misrepresentation or falsification, my application will be rejected; my name removed from consideration for employment and I may be dismissed if employed. I hereby authorize Torrance County to investigate the information contained herein and contact those previous employers I have approved.

Sign Here in Ink

Date

THE SELECTION PROCESS. Upon the closing date of the announcement, the Human Resources Office will review all applications received to determine if applicants meet the minimum qualifications for the position. The qualifying applications are then delivered to the selecting official(s) for selection of interviewees. If you are selected for an interview, you will be contacted by the interviewing official. After all interviews have taken place and an applicant has been offered and accepted the position, the remaining applicants will be contacted by telephone or letter to be informed that the position has been filled.

CONTINUATION SHEET FOR EMPLOYMENT HISTORY

	Employer's Name	Kind of Business	From (Mo/Yr)	To (Mo/Yr)
Employer's Address		Street/Mailing		Supervisor's Name and Telephone Number
Your Job Title	Check (✓) one: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time		Current or Last Hourly Pay	
Hours per week: _____		\$		
If you supervised employees, indicate number and give dates #	From (Mo/Yr)	To (Mo/Yr)	Place of employment (City and State) if different from employer's address	
Duties:				
				DO NOT WRITE IN THIS AREA
				YEARS MONTHS
Reason for Leaving:				

	Employer's Name	Kind of Business	From (Mo/Yr)	To (Mo/Yr)
Employer's Address		Street/Mailing		Supervisor's Name and Telephone Number
Your Job Title	Check (✓) one: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time		Current or Last Hourly Pay	
Hours per week: _____		\$		
If you supervised employees, indicate number and give dates #	From (Mo/Yr)	To (Mo/Yr)	Place of employment (City and State) if different from employer's address	
Duties:				
				DO NOT WRITE IN THIS AREA
				YEARS MONTHS
Reason for Leaving:				

RELEASE OF INFORMATION FORM

Applicant: I give all prior employers permission to release to Torrance County information in my personnel file regarding the following areas of my previous employment.

[Please specify some or all]

- | | | |
|--|---|--|
| <input type="checkbox"/> Date of Hire | <input type="checkbox"/> Date of Termination | <input type="checkbox"/> Beginning Salary |
| <input type="checkbox"/> Ending of Salary | <input type="checkbox"/> Attendance Records | <input type="checkbox"/> Tardiness |
| <input type="checkbox"/> Vacation Time | <input type="checkbox"/> Sick Leave Time | <input type="checkbox"/> Leave Without Pay |
| <input type="checkbox"/> Performance Evaluations | <input type="checkbox"/> Disciplinary and Termination Records | |
| <input type="checkbox"/> Workers' Compensation Leave | | |

I hereby release and discharge all prior employers from all claims or actions for loss, liability, damage, or expense which I now have or which may hereafter arise from the making of any inquiries about me or the furnishing of any information about me in connection with my application for employment with Torrance County.

Name: _____ Date: _____



**FAIR CREDIT REPORTING ACT
DISCLOSURE STATEMENT**
Employment or Insurance Purposes

Torrance County, when considering your application for employment or insurance, when making a decision whether to offer you employment or insurance, when deciding whether to continue your employment or insurance, and when making other decisions directly affecting you, may wish to obtain and use a "consumer report" from a "consumer reporting agency". These terms are defined in the Fair Credit Reporting Act ("FCRA"), which applies to you. You are a "consumer" with rights under the FCRA.

A "consumer" is an individual.

A "consumer reporting agency" is any person or business which for monetary fees, dues, or on cooperative nonprofit basis, regularly engages in whole or in part in the practice of assembling or evaluating consumer credit information or other information on consumers for the purpose of furnishing "consumer reports" to others, and which uses any means or facility of interstate commerce for the purpose of preparing or furnishing "consumer reports".

A "consumer report" is any written, oral, or other communication of any information by a "consumer reporting agency" bearing on a consumer's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected, in whole or in part, for the purpose of serving as a factor in establishing the consumer's eligibility for employment purposes or other purposes authorized under the FCRA.

If Torrance County obtains a "consumer report" about you, and if, based on any information in the consumer report, Torrance County makes a decision for employment, insurance or credit purposes that directly and adversely affects you, you may be provided with a copy of the "consumer report". You may also contact the Federal Trade Commission about your rights under the FCRA as a "consumer" with regard to "consumer reports" and "consumer reporting agencies".

Torrance County has contracted with SAMBA Holdings, Inc. to provide records. SAMBA furnishes information as available from state and national agencies. SAMBA does not issue an opinion on the information provided, or participate in any action or decision based on the information provided. SAMBA may be contacted in writing concerning a consumer report about you:

In writing:

SAMBA Holdings, Inc.
1730 Montañó NW Suite F
Albuquerque, NM 87107

By phone:

1-800-947-2622



Public and Private Record Release
Employment or Insurance Purposes

The Fair Credit Reporting Act (FCRA) allows Torrance County to gain access to Public and Private records with my permission for employment or insurance purposes.

By signing this release:

I hereby give permission to Torrance County to investigate my **driving and/or criminal history** for purposes allowable under the FCRA.

I understand that my eligibility for employment and/or continued employment is contingent upon Torrance County gaining access to these records.

I confirm that I have read and understand the "Fair Credit Reporting Act Disclosure Statement" provided to me by Torrance County.

I authorize Torrance County to periodically receive these records, and such authorization will remain in effect for one year or for the duration of my relationship with Torrance County, whichever period is longer.

_____	_____	_____
Signature	Date	Social Security Number (For Criminal Records Only)
_____	_____	_____
Printed Name (as it appears on drivers license)	Driver License Number	
_____		Circle Gender M or F
Date of Birth - Month/Day/Year		

SUBSCRIBED AND SWORN BEFORE ME THIS

_____ DAY OF _____, 20_____.

NOTARY PUBLIC

My commission expires: _____, 20_____

(Seal)

Social Security Number

			-					
--	--	--	---	--	--	--	--	--

Date of Birth

		-			-				
MONTH			DATE			YEAR			

First Name	Middle Name	Last Name
Other Names Used (maiden name, AKA names, etc.)		

Current Residential Address		
City	State	Zip Code

List each CITY, STATE and ZIP CODE (if known) where you have lived during the past seven years:

City	State	Zip Code	From Date	To Date	
					[]
					[]
					[]
					[]
					[]

Driver's License Number	State of Issue

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Torrance County ("the Company") may obtain information about you from a third party consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying.

You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you, and disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. Please be advised that the nature and scope of the most common form of investigative consumer report is an employment history or verification. These searches will be conducted by Universal Background Screening, Inc., Post Office Box 5920, Scottsdale, AZ 85261, 1-877-263-8033, www.universalbackground.com. The scope of this disclosure is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports throughout the course of your employment to the extent permitted by law.

Signature

Date