

City of Burlington
Department of Administration

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DHB



JOB POSTING – Open to the Public

DEPUTY MUNICIPAL CLERK - Title code 01509

Posting Dates: August 2, 2022 to August 15, 2022

Under direction of the Municipal Clerk on a regular and recurring basis, plans, organizes, manages, and coordinates the various activities of the office in accord with state and local laws, rules, regulations, and policies; may take and transcribe stenography; does other related duties.

Successful candidate must be highly self-motivated, with excellent communication, interpersonal, and organizational skills, and have the ability to multitask efficiently. Must be computer proficient and experienced with municipal software programs. Position requires ability to assist the Municipal Clerk with all statutory duties, including but not limited to; preparation of agendas, resolutions, minutes, ordinances, public record requests, issuing various permits and licenses, records management, attendance at Council meetings and elections. Evening meetings and occasional Saturdays required. Must have ability to maintain professionalism, confidentiality and be customer service oriented. Must be able to effectively manage and meet multiple deadlines, and interface effectively with the Governing Body, Administrator and other Department Heads, residents, employees, volunteers, business owners and professionals.

EXAMPLES OF WORK: *NOTE: The examples of work for this title are for illustrative purposes only. A particular position using this title may not perform all duties listed in this job specification. Conversely, all duties performed on the job may not be listed.* Reviews records and correspondence to ensure completeness, accuracy, and timeliness. Prepares agendas for meetings of the governing body. Provides information for the preparation of the budget. Purchases supplies and equipment. Receives license applications, fees, and issues certain licenses. Registers and transfers voters. May take and transcribe dictation. Provides assignments and instructions to subordinates and supervises their work. Reviews and verifies payroll. Prepares checks. For elections, prepares and distributes election equipment, materials, and supplies, and maintains records. Provides instructions to election officers. Receives election returns. Records bids for the purchase of equipment and supplies. Administers and records oaths of office. Directs correspondence and inquiries to various municipal departments for appropriate action. Prepares and records resolutions, ordinances, vouchers, and other municipal forms. Prepares minutes of the meetings of the governing body. Prepares reports for the public record. Prepares periodic reports of documents or licenses issued, cash receipts and accounts. May issue certified copies of birth, marriage, and death records. May issue burial, disinterment, and transit permits to morticians. In the absence of the municipal clerk, assumes duties, responsibilities, and authority and may be authorized to act as the municipal clerk when the municipal clerk is not present.

EDUCATION: Graduation from High School or possession of an approved High School Equivalency Certificate.

EXPERIENCE: Four (4) years of clerical experience involving responsibility for maintaining records of business transactions and office activities requiring a knowledge of office systems/procedures.

CERTIFICATE: N.J. Registered Municipal Clerk Certification and/or CMR Certified Municipal Registrar preferred.

KNOWLEDGE AND ABILITIES: Knowledge of state and local laws, rules, regulations, policies, and procedures that apply to the administration of municipal affairs. Knowledge of methods and procedures used to prepare a municipality for an election. Ability to provide assignments and instructions to subordinates and supervise their work. Ability to prepare clear, sound, accurate, and informative reports containing findings, conclusions, and recommendations. Ability to maintain the minutes of the governing body. Ability to take and transcribe dictation. Ability to process, record, and file resolutions. Ability to administer and record oaths of office. Ability to interpret laws, rules and regulations and apply them to specific situations. Ability to issue licenses and collect and record fees. Ability to purchase supplies and equipment. Ability to answer and/or direct correspondence and inquiries for action to various municipal departments. Ability to establish and maintain cooperative working relationships with those interested or involved in the work of the unit. Ability to learn to utilize various types of electronic and/or manual recording and information systems used by the agency, office, or related units. Ability to read, write, speak, understand, or communicate in English sufficiently to perform the duties of this position. American Sign Language or Braille may also be considered as acceptable forms of communication.

Preference to City of Burlington residents. All employees of State and local government must reside in the State of New Jersey, unless exempted under the law. The City of Burlington is an Equal Opportunity Employer. If you need reasonable accommodations to apply due to disability please call 386-0200, ext. 133.

<p>This is an Unclassified position. Salary range: \$45,341 to \$65,999 depending on qualifications. Interested persons should complete an application by 5:00 PM August 15, 2022 to: City of Burlington Administrator, 525 High Street, Burlington, NJ 08016; Equal Opportunity Employer. No phone calls please.</p>



CITY OF BURLINGTON

525 High Street, Burlington, NJ 08016

APPLICATION FOR EMPLOYMENT

All applicants are considered for all positions without regard to race, religion, color, sex, gender, sexual orientation, pregnancy, age, national origin, ancestry, physical/mental disability, medical condition, military/veteran status, genetic information, marital status, ethnicity, citizenship or immigration status or any other protected classification, in accordance with applicable federal, state, and local laws. By completing this application, you are seeking to join a team of hardworking professionals dedicated to consistently delivering outstanding service to our customers and contributing to the financial success of the organization, its clients, and its employees. Equal access to programs, services, and employment is available to all qualified persons. Those applicants requiring accommodation to complete the application and/or interview process should contact a management representative.

Please print:

Position(s) Applied for		Date of Application	
Print Name (Last, First, & Middle)			
Street Address		City	State
Main Phone Number	Alternate Phone Number	Email	

EMPLOYMENT EXPERIENCE: PLEASE LIST THE NAMES OF YOUR PRESENT OR PREVIOUS EMPLOYERS IN CHRONOLOGICAL ORDER WITH PRESENT OR MOST RECENT EMPLOYER LISTED FIRST. BE SURE TO ACCOUNT FOR ALL PERIODS OF TIME. IF SELF-EMPLOYED, GIVE FIRM NAME AND SUPPLY BUSINESS REFERENCES. ADD ADDITIONAL PAGE IF NECESSARY.

1. Name of Employer	Supervisor	May we contact?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address		
Phone Number	Dates Employed (Month/Year)	
	From	To
Job Title and Duties	Reason for Leaving	
2. Name of Employer	Supervisor	May we contact?
		<input type="checkbox"/> Yes <input type="checkbox"/> No

Street Address		
Phone Number	Dates Employed (Month/Year)	
	From	To
Job Title and Duties	Reason for Leaving	
3. Name of Employer	Supervisor	May we contact?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address		
Phone Number	Dates Employed (Month/Year)	
	From	To
Job Title and Duties	Reason for Leaving	

**Please use an additional sheet if your employment history exceeds 3 positions.*

Have you ever been involuntarily terminated or asked to resign from any job?..... Yes No

If yes, please explain:

Please explain any significant gaps in your employment history:

Please list any other experience, job related skills, additional languages, or other qualifications that you believe should be considered in evaluating your qualifications for employment:

EDUCATION

Please describe your educational background in the table provided below:

	School Name	Years Completed	Diploma/ Degree (Yes/No)	Area of Study/Major	Specialized Training, Skills, or Extra- Curricular Activities
High School					
College/ University					
Graduate/ Professional School					
Trade School					
Other					

BUSINESS AND PROFESSIONAL REFERENCES

Please list three professional references of individuals who are **not** related to you:

Name and Title	Relationship	Phone Number or Email

PERSONAL REFERENCES

Please list three personal references of individuals who are **not** related to you:

Name and Title	Relationship and Years Acquainted	Phone Number or Email

GENERAL INFORMATION

1. Have you ever used another name?..... Yes No
2. Is any additional information relative to name changes, use of an assumed name, or nickname necessary to enable a check on your work and educational record?..... Yes No
 - a. If yes to either of the above, please explain:

3. Have you ever worked for the City of Burlington previously?..... Yes No

- a. If yes, please give dates and position: _____
- b. If yes, state your reason for leaving: _____
- 4. Do you have friends and/or relatives who currently work for the City of Burlington..... Yes No
 - a. If yes, provide the name(s), title, and relationship(s) to you: _____
- 5. On what date are you available to begin work? _____
- 6. Days/Hours available to work:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

- 7. Are you available to work? Full-time Part-time Shift Work Temporary
- 8. If hired, would you have a reliable means of transportation to and from work?..... Yes No
- 9. If you reside in the City of Burlington, how long have you lived in the City?..... _____
- 10. Are you at least 18 years old? Yes No
 - a. Note: If under 18, hire is subject to verification that you are of minimum legal age.
- 11. If hired, can you present evidence of your identity and legal right to work in this country?..... Yes No
- 12. Are you able to perform the essential job functions of the job for which you are applying with or without reasonable accommodation?..... Yes No
 - a. Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for qualified applicants/employees to perform essential job functions.

APPLICANT’S STATEMENT AND AGREEMENT: PLEASE READ AND INITIAL EACH PARAGRAPH BELOW.

_____ I understand and agree that if my employment application to the City of Burlington is incomplete, my application for employment may be rejected and I may be disqualified from being hired.

_____ I hereby authorize the City of Burlington to thoroughly investigate my references, work record, education and other background matters to verify my experience, credentials, and suitability for employment. I further, authorize the prior employers and references I have listed to disclose to the City of Burlington any and all letters, reports and other information related to my work history and work records, without giving me prior notice of such disclosure. In addition, I hereby release the City of Burlington, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation of my credentials, experience and references or their disclosure relating to a request for information.

_____ In the event that I become employed with the City of Burlington, I understand that I am required to comply with all rules and regulations of the City of Burlington.

_____ If hired, I understand and agree that my employment with the City of Burlington is at-will, and that neither I, nor the City of Burlington is required to continue the employment relationship for any specific term. I further understand that the City of Burlington or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications.

_____ I understand that safety of employees is extremely important to the City of Burlington and that the City of Burlington is committed to ensuring a safe working environment. I understand that I, and every employee, have a responsibility to prevent accidents and injuries by observing all safety procedures and guidelines and following the directions of my site supervisor. I understand and agree to comply with federal, state, and local regulations related to on-the-job safety and precautions to protect employee health, including my health and the health and safety of fellow employees.

_____ I hereby certify that all of the answers and information provided by me in this written application and throughout the application process (including any oral interviews and background checks) are true and correct as well as complete. I further certify that I, the undersigned applicant, have personally reviewed and completed this application. I understand that any omission or misstatement of material fact on this application or the inaccuracy or falsification of any document or information used to secure employment with the City shall be grounds for rejection of this application and acknowledge that it is sufficient grounds for my immediate discharge if I am employed, regardless of the amount of time which elapsed between the date of submission of this application and the date of the discovery of the inaccuracy or falsehood.

_____ I understand that if I am selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard.

_____ I understand that if any term, provision, or portion of this Agreement is declared void or unenforceable, it shall be severed and the remainder of this Agreement shall be enforceable.

_____ I understand that screening tests for illegal drug use may be required before hiring and during my employment here.

_____ I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

MY SIGNATURE BELOW ATTESTS TO THE FACT THAT I HAVE READ, UNDERSTAND, AND AGREE TO ALL OF THE ABOVE TERMS and THAT ALL OF THE INFORMATION WHICH I HAVE PROVIDED IN THIS APPLICATION AND DURING THE APPLICATION PROCESS (INCLUDING ANY PERSONAL INTERVIEWS) IS TRUE.

Signature: _____

Name (print): _____ Date: _____

CITY OF BURLINGTON AFFIRMATIVE ACTION VOLUNTARY INFORMATION

The City of Burlington considers all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practises and do not discriminate on the basis of any unlawful criteria.

Providing this information is **STRICTLY VOLUNTARY**. Failure to provide it will not subject you to any adverse personnel decision or action.

Please be advised that this survey is *not* a part of your official application for employment. It will not be used in any hiring decision. To be filed separately from application. The information will be used and kept confidential in accordance with applicable laws and regulations.

Please Print

Position(s) applied for _____ Date: ____/____/____

Referral Source

- | | | |
|---|---|--|
| <input type="checkbox"/> Walk-in | <input type="checkbox"/> Government Employment Agency | <input type="checkbox"/> Private Employment Agency |
| <input type="checkbox"/> Employee | <input type="checkbox"/> Relative | <input type="checkbox"/> School |
| <input type="checkbox"/> Advertisement-Source _____ | | <input type="checkbox"/> Other _____ |

Name of person who referred you IF APPLICABLE _____

Applicant Information:

Name: _____ Telephone # () _____
Last First M.I.

Address: _____
Street City State Zip

- Male Female

Please check one of the following Equal Employment Opportunity Identification Groups:

- | | |
|---|---|
| <input type="checkbox"/> American Indian / Alaskan Native | <input type="checkbox"/> White |
| <input type="checkbox"/> Native Hawaiian / Other Pacific Islander | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Hispanic / Latino (White race only) | <input type="checkbox"/> Black / African American |
| <input type="checkbox"/> Hispanic / Latino (all other races) | |

For Administrative Use Only

Position(s) applied for

- Available Not Available Other

Other positions considered for _____

Hired Yes No

Position hired for _____ Date of hire ____/____/____

From the EEO job classifications listed below, which one best describes the position filled?

- | | | |
|---|--|--|
| <input type="checkbox"/> Officials and Managers | <input type="checkbox"/> Sales Workers | <input type="checkbox"/> Operatives (semi-skilled) |
| <input type="checkbox"/> Professionals | <input type="checkbox"/> Office and Clerical Workers | <input type="checkbox"/> Laborers (unskilled) |
| <input type="checkbox"/> Technicians | <input type="checkbox"/> Craft Workers (skilled) | <input type="checkbox"/> Service Workers |

Notes: _____

Completed by : _____ Date ____/____/____