

## Seasonal Tax Clerk

The City of Franklin is accepting resumes for the position of a Seasonal Tax Clerk. The ideal candidate must have a high school diploma or equivalent; training and/or experience in office practices and procedures and bookkeeping or accounting; skill in computer operation. Preference will be given to candidates with experience in municipal tax practices. Applicants must be available to work a minimum of 37 ½ hours per week during tax season from February 1 through May 31. Applications, including a full job description, are available at the Administration Building at 1 Benjamin Franklin Way, Franklin, OH 45005 or on-line at [franklinohio.org](http://franklinohio.org). EOE

Please send completed application and resume with prior experience to 1 Benjamin Franklin Way, Franklin, OH 45005; ATTN: Finance Director or email to [kervin@franklinohio.org](mailto:kervin@franklinohio.org).



## APPLICATION FOR EMPLOYMENT

**Instructions:** Please complete this form completely and accurately. Please use a pen and print clearly.

### SECTION I – PERSONAL INFORMATION

Name: \_\_\_\_\_  
Last First MI

Street Address City State Zip Code

Home Phone or Cell Phone Work Phone E-mail Address

May we contact you at: ☐ Home Best times: \_\_\_\_\_  
☐ Work Best times: \_\_\_\_\_

Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Are you an American citizen? ☐ Yes ☐ No

If no, are you aware of any problems with your Visa or Immigration Status that would prevent you from lawfully being employed? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

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

### SECTION II – APPLICATION

Position(s) you are applying for: \_\_\_\_\_

Are you applying in response to an advertisement? ☐ Yes ☐ No

If yes, where did you see the job advertised: \_\_\_\_\_

Are you seeking: ☐ Full-time ☐ Part-time ☐ Seasonal ☐ Volunteer  
☐ No Preference

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

If yes, where: \_\_\_\_\_

Minimum salary expectation: \$ \_\_\_\_\_ Date available to start: \_\_\_\_/\_\_\_\_/\_\_\_\_



## APPLICATION FOR EMPLOYMENT

### SECTION III – EMPLOYMENT HISTORY

Please list your last five employers, beginning with the most recent:

Employer's Name	Dates Employed:	Your Job Title:
Street Address/City/State/Zip	From: _____ Month/Year	Beginning: _____
Supervisor's Name	To: _____ Month/Year	End: _____
Your Salary:		
Beginning: _____		
End: _____		
Describe your duties, responsibilities, equipment operated, etc.: _____		
Describe your reason(s) for leaving: _____		

Employer's Name	Dates Employed:	Your Job Title:
Street Address/City/State/Zip	From: _____ Month/Year	Beginning: _____
Supervisor's Name	To: _____ Month/Year	End: _____
Your Salary:		
Beginning: _____		
End: _____		
Describe your duties, responsibilities, equipment operated, etc.: _____		
Describe your reason(s) for leaving: _____		



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Employer's Name	Dates Employed:	Your Job Title:
Street Address/City/State/Zip	From: _____ Month/Year	Beginning: _____
Supervisor's Name	To: _____ Month/Year	End: _____
Your Salary:		
Beginning: _____		
End: _____		
Describe your duties, responsibilities, equipment operated, etc.: _____		
_____		
Describe your reason(s) for leaving: _____		
_____		

Employer's Name	Dates Employed:	Your Job Title:
Street Address/City/State/Zip	From: _____ Month/Year	Beginning: _____
Supervisor's Name	To: _____ Month/Year	End: _____
Your Salary:		
Beginning: _____		
End: _____		
Describe your duties, responsibilities, equipment operated, etc.: _____		
_____		
Describe your reason(s) for leaving: _____		
_____		



## APPLICATION FOR EMPLOYMENT

Employer's Name	Dates Employed:	Your Job Title:
Street Address/City/State/Zip	From: _____ Month/Year	Beginning: _____
Supervisor's Name	To: _____ Month/Year	End: _____
Your Salary:		
Beginning: _____		
End: _____		
Describe your duties, responsibilities, equipment operated, etc.:		
Describe your reason(s) for leaving:		

### SECTION IV – EDUCATION AND TRAINING

	Formal Education	College	Technical School
School Name and Location			
Years Completed	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 Above	1 2 3 4 Above
Diploma/Degree/Major			
Other School(s) attended: _____			
Please describe the courses, technical training or skills you have attained which you feel would help you perform the job for which you are applying (e.g. special machines or equipment you operate, hobbies or volunteer work projects which have taught you qualifying skills, etc):			



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### SECTION V - REFERENCES

Provide the names and phone numbers of five references (not related to you) who would know of your skills for this position:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Is this a business or personal reference? ☐ Business ☐ Personal

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Is this a business or personal reference? ☐ Business ☐ Personal

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Is this a business or personal reference? ☐ Business ☐ Personal

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Is this a business or personal reference? ☐ Business ☐ Personal

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Is this a business or personal reference? ☐ Business ☐ Personal

### SECTION VI – MISCELLANEOUS

(The following information will be used only if it is directly related to the classification/position for which you are applying.)

Have you previously been employed in Ohio by the State, a county, a city, a village, a township or any other governmental entity? ☐ Yes ☐ No

If yes, where and what was your job title: \_\_\_\_\_

Have you any job-related training in the U.S. Military? ☐ Yes ☐ No

If yes, what kind of training? \_\_\_\_\_

Have you ever filed an application here before? ☐ Yes ☐ No

Have you ever been employed here before? ☐ Yes ☐ No





## APPLICATION FOR EMPLOYMENT

### SECTION VII – SIGNATURE PAGE

I hereby declare that the information provided by me in this application for employment is true, correct and complete to the best of my knowledge. I understand that, if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal.

I hereby authorize the City to perform all necessary job-related evaluations to determine my qualifications for the position, including to obtain information through contacts with my former employers and references, through interviews and through a background check. I understand that if I have applied for a classified position through a Civil Service Examination, such job-related evaluations will not be conducted unless I am on the eligibility list for the tested position.

I hereby acknowledge that I am aware that if I am made a conditional offer of employment, I may also be required to pass appropriate examinations as a condition to employment to determine whether I am able to perform the essential functions of the job, with reasonable accommodation where necessary. Such examinations may include a physical exam, drug test, voice stress test, or other appropriate examination.

Date: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

**CITY OF FRANKLIN**  
An Equal Opportunity Employer  
**POSITION DESCRIPTION**

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<b>Department:</b>	Finance	<b>Title:</b>	Seasonal Income Tax Clerk
<b>Division:</b>	Income Tax		

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<b>Civil Service Status:</b>	Unclassified	<b>Reports to:</b>	Finance Director, Income Tax
<b>Employment Status:</b>	Seasonal		Administrator
<b>FLSA Status:</b>	Non-Exempt	<b>Supervises:</b>	

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**QUALIFICATIONS:**

High school diploma or equivalent.

**LICENSURE AND/OR CERTIFICATION REQUIREMENTS:**

Valid Ohio's driver's license.

**MINIMUM ACCEPTABLE CHARACTERISTICS:**

**Knowledge of:** departmental policies and procedures; office practices and procedures; basic accounting and bookkeeping; public relations

**Skill in:** N/A

**Ability to:** carry out simple instructions; cooperate with co-workers on group projects; read, copy, and record figures accurately; and communicate effectively.

**ESSENTIAL FUNCTIONS OF THE POSITION:** For the purposes of 42 USC 12101.

1. Assists Income Tax Division during peak tax season in maintaining records of tax receipts and refunds; collecting money and posting daily receipts; and waiting on customers.
2. Performs clerical work, such as typing, filing, and answering telephones.
3. Meets all job safety requirements and all applicable OSHA safety standards that pertain to essential functions.
4. Demonstrates regular and predictable attendance.

**OTHER DUTIES AND RESPONSIBILITIES:**

5. Performs other duties as required.



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**EQUIPMENT OPERATED:** The following are examples only and are intended to be all inclusive.

Computer, calculator, copier, fax machine, typewrite, telephone.

**INHERENTLY HAZARDOUS OR PHYSICALLY DEMANDING WORKING CONDITIONS:**

1. Emergency plans and fire plans.
2. Compressed gases.
3. Portable fire extinguishers.
4. Handling of materials and supplies (includes mechanical handling equipment, that manner in which things are stored, and housekeeping).
5. Hazardous chemicals.

**GENERAL DUTY: SAFE AND HEALTHFUL WORKPLACE:**

The employee:

1. Works in or around crowds.
2. Has contact with potentially violent or emotionally distraught persons.

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This position description in no manner states or implies that these are the only duties and responsibilities to be performed by the position incumbent. My (employee) signature below signifies that I have reviewed and understand the contents of my position description.

Name of Employee: \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approval of Appointing Authority

\_\_\_\_\_  
Date