

**DEPARTMENT OF LABOR
JOB OPPORTUNITY
FISCAL/ADMINISTRATIVE SUPERVISOR (AR 29)
BUSINESS MANAGEMENT**

PLEASE FOLLOW THE SPECIFIC APPLICATION FILING INSTRUCTIONS AT THE BOTTOM OF THIS PAGE!

Open To: Current State Employees
Location: 200 Folly Brook Boulevard, Wethersfield
Job Posting No: 747
Hours: Full-time
Annual Salary: \$85,011 - \$110,499
Closing Date: November 15, 2016

Eligibility Requirement: Candidates must have applied for and passed the Fiscal/Administrative Supervisor exam and be on a current certification list promulgated by the Department of Administrative Services for this classification. State employees who achieved permanent status in this class may apply.

Duties: Supervises maintenance of accounts; supervises preparation of financial statements and reports and budget requests in financial planning; reviews and authorizes expenditures; schedules, assigns, oversees and reviews work of staff; provides staff training and assistance; conducts performance evaluations; determines priorities and plans work; establishes and maintains procedures; develops or makes recommendations on development of policies and standards; acts as liaison with other operating units, agencies and outside officials regarding policies and procedures; prepares reports and correspondence; oversees planning and implementation of financial aspects of EDP systems; utilizes EDP systems for financial records, reports, and analyses; assists in analyzing impact of proposed regulations and legislation on agency fiscal/administrative programs and functions; supervises grant and contract administration, including fiscal record keeping and reporting and preparation of new contracts and grant applications; supervises requisitioning, stores and inventory control; supervises purchasing functions; in addition to supervising fiscal/administrative functions, may supervise support services such as stores, inventory, facilities/equipment maintenance, mailroom, food services, facilities/equipment security; may supervise payroll preparation and preparation and processing of human resources forms; performs related duties as required.

Note: The filling of this position will be in accordance with reemployment, SEBAC, transfer, promotion and merit employment rules, if applicable.

Application Instructions: Interested and qualified candidates who meet the above requirements should submit a cover letter, resume, State of Connecticut Application for Examination or Employment (CT-HR-12), State of Connecticut Addendum to the Application Form for Examination or Employment – Criminal Convictions (CT-HR-13), the Connecticut Department of Labor Pre-Authorization and Release form (immediately follows this job announcement) which includes a statement regarding the Guide to the Code of Ethics for Public Officials and State Employees, a copy of your last performance rating, and attendance record from October 2014 to the present. Current Department of Labor employees are not required to submit the CT-HR-13, the Pre-Authorization and Release form, and attendance record. The CT-HR-12 and CT-HR-13 can be downloaded from the DAS website at <http://www.das.state.ct.us/cr1.aspx?page=13> . Applications will not be considered if incomplete, missing materials, or not received or postmarked by the above closing. Submit via mail or fax to:

**DEPARTMENT OF LABOR – HUMAN RESOURCES
200 Folly Brook Boulevard
Wethersfield, CT 06109
FAX NUMBER (860) 263-6699**

Please note: If you are choosing to fax your application, it is not necessary to also send an original copy. Due to the large number of expected applicants we cannot confirm receipt of application materials. Not all individuals who apply will be granted an interview.

AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER

The State of Connecticut is an equal opportunity/affirmative action employer and strongly encourages the applications of women, minorities, and persons with disabilities.

CONNECTICUT DEPARTMENT OF LABOR

Pre-Employment Screening – Authorization and Release

Completion of this form is voluntary; however, if consent to obtain this information is not given, it may have an adverse effect on your employment opportunities with the Connecticut State Department of Labor.

Applicant's Name (Last, First, Middle): _____

Mailing Address: _____

Home Phone Number: () _____

I, the undersigned, recognize and understand that this constitutes my consent and authorization to disclose or furnish any relevant and necessary information or records to the Department of Labor concerning my character, employment, or military service as may be necessary for a determination of my suitability for employment with the Connecticut State Department of Labor.

This authorization is executed with the full knowledge and understanding that the Labor Department will take measures to protect the aforementioned information against unauthorized disclosure to any parties not having a legitimate need for it in the discharge of the official business of the Department.

I hereby RELEASE any respondent from any and all liability for damages resulting from a decision by the Department not to employ me on account of compliance, or any attempts at compliance with this authorization, except for any damages resulting from knowingly providing false or misleading information or records about me.

A copy of this authorization shall be as effective and valid as the original. This authorization shall be valid for twelve (12) months from the date of my signature.

Date Signed	Signature of Applicant
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As a candidate being considered for employment at the Department of Labor, I have reviewed a copy of the Guide to the Code of Ethics for Public Officials and State Employees.

Date Signed	Signature
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A copy of the Guide to the Code of Ethics for Public Officials and State Employees may be obtained/reviewed at the following link:

http://www.ct.gov/ethics/lib/ethics/guides/2012/public_officials_and_state_employees_guide_december_2012_rev.pdf