

CALHOUN COUNTY  
TREASURER'S OFFICE  
EMPLOYMENT CLASSIFICATION

TITLE: Clerk - Driver's License, Motor Vehicle and Tax

GENERAL DESCRIPTION

Under close supervision, performs routine issuing of driver's license, processing of motor vehicle transactions, repetitive clerical tasks, and performs related work as required.

REPORTS TO:

- 1) Treasurer
- 2) Motor Vehicle Deputy
- 3) Tax Deputy

SUPERVISES: Part-time Help (on occasion)

ESSENTIAL FUNCTIONS:

1. Will issue driver's licenses including new licenses and renewals of all types. Will administer written tests as needed appropriate to the type of license being sought. Will also issue IDs and handicapped placards. After the appropriate training, may be allowed to administer driving tests for passenger vehicles and motorcycles.
2. Assist motor vehicle owners in making application for title transfer and registration/plate renewals. Records owner and vehicle information, issuing titles, restricted titles, duplicate titles, duplicate registrations and plates, computing fees, credits and delinquent fees.
3. Computes tax money on motor vehicle titles for distribution to the Iowa Department of Finance and Revenue and the County by figuring percentages on price of the vehicle.
4. Completes statements and charts in order to provide records for audit by compiling and organizing financial data.
5. Assist balancing of receipts with cash at the end of each day.
6. Records and/or retrieves motor vehicle transactions applicable in the state data processing system.
7. Assist in preparation of real estate and personal property tax statements in order to notify taxpayers of taxes due.
8. Maintains tax receipts records in order to account for collections for the day by posting figures via cash receipting in tax department computer system.
9. Operates a computer terminal in order to enter and retrieve data.
10. Performs other duties that may be requested by the Treasurer.
11. Attendance and punctuality, according to established hours of work determined by the Dept. Head / Supervisor, are essential functions of this position.

NOTE: The above duties are listed as those being typical of those assigned in this job and should not be construed as limiting the employer's prerogative to assign other duties not listed. They include

some duties of both the auto and tax departments, because the departments are cross-trained.

#### KNOWLEDGE, ABILITIES, SKILLS, AND PERSONAL CHARACTERISTICS

1. Knowledge of the Code of Iowa as related to processing motor vehicle registration transaction.
2. Knowledge of basic mathematics including addition, subtraction, multiplication and division with whole numbers and decimals.
3. Ability to issue driver's license after proper certification from the Iowa Driver's License Department.
4. Ability to make mathematical computations as related to computing fees, credits, and delinquency fees.
5. Ability to operate a computer terminal as related to entering and retrieving data.
6. Ability to communicate orally with the general public as related to explaining vehicle registration procedures.
7. Knowledge of English grammar, vocabulary and spelling as related to typing correspondence and handling written and oral communication.
8. Knowledge of human relations and office protocol as related to typing correspondence and handling written and oral communications.
9. Knowledge of filing procedures as related to maintaining alphabetical and numerical filing systems.
10. Knowledge of business letter format as related to preparing and typing correspondence from rough draft.
11. Acquainted with organizational policies, procedures, forms and reports.
12. Knowledge of basic methods and procedures for purchasing office supplies when authorized by Treasurer. Able to conduct inventories of supplies on hand.
13. Ability to operate a typewriter at 40 words per minute accurately as related to typing correspondence and other documents.
14. Ability to file written materials using alphabetical and numerical filing systems.
15. Ability to handle confidential information with discretion.

#### EDUCATION, EXPERIENCE, AND SPECIAL QUALIFICATIONS

Graduation from high school (or GED equivalency) or one year of full-time (or equivalent part-time) clerical experience or closely related office work.

#### WORKING CONDITIONS

Normal indoor office setting; possible stress from seasonal work loads. Frequent public contact. May be frequent hostile, defensive contact from customers. Stress related to deadlines and time frames.



# APPLICATION FOR EMPLOYMENT

TREASURER'S OFFICE  
416 4<sup>th</sup> STREET, SUITE 2  
ROCKWELL CITY IA 50579  
Telephone: 712/297-7111  
Fax: 712/297-7479

E-mail: lerkenbrack@calhouncountyiowa.com

Please answer **ALL** questions. Print or write carefully. **If you provide false, inaccurate, or incomplete information in this application form or in any interview or if you fail to disclose information requested in this application form or in any interview, you will not be eligible for employment, or, if you are hired, you will be subject to termination.**

Full Name	
Present Address	Home Telephone Number
City, State, Zip	Business or Cell Phone Number

State the position(s) for which you are applying: \_\_\_\_\_

Check which employment conditions you will accept:

\_\_\_\_\_ Full-time (37.5 hours)      \_\_\_\_\_ Part-time (<40 hours)

How did you find out about this position? \_\_\_\_\_

Have you ever been convicted of a crime: \_\_\_\_\_ If so, please provide details.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Note:** Convictions will not necessarily bar you from employment. We will consider the number, nature, seriousness and recency of the convictions in making our decision.

Will you sign a release form allowing Calhoun County to conduct a criminal record check? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been terminated from employment? \_\_\_\_\_ Yes \_\_\_\_\_ No      If yes, describe the circumstances

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have a valid Iowa driver's license? \_\_\_\_\_ Yes \_\_\_\_\_ No

Will you sign a release form allowing Calhoun County to obtain a driving record? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you a veteran? \_\_\_\_\_ Yes \_\_\_\_\_ No      Do you qualify for veteran's preference? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Education**

	Name and Address	Course of Study	Circle Last Year Completed	Degree Earned
High School			1 2 3 4	
College			1 2 3 4	
Other Schools			1 2 3 4	

**Work History**

Job Title	Employer Name, Address, Telephone #	Date Employed From: _____ To: _____
Name Employed Under	Immediate Supervisor & Title	Last Salary
Reason for Leaving	Average # of Hours Worked Per Week	Nature of Business
Duties		
Job Title	Employer Name, Address, Telephone #	Date Employed From: _____ To: _____
Name Employed Under	Immediate Supervisor & Title	Last Salary
Reason for Leaving	Average # of Hours Worked Per Week	Nature of Business
Duties		
Job Title	Employer Name, Address, Telephone #	Date Employed From: _____ To: _____
Name Employed Under	Immediate Supervisor & Title	Last Salary
Reason for Leaving	Average # of Hours Worked Per Week	Nature of Business
Duties		

**Read Before Signing:**

I certify that this application contains no willful misrepresentations and that the information is true and complete to the best of my knowledge. I understand that should investigation at any time disclose otherwise, my application may be rejected and my name may be removed from consideration for employment.

In connection with my application for employment with the County, I expressly authorize the release to the County of any records or information which may refer or relate to my application for employment, including, but not limited to, records of schools, law enforcement or criminal justice agencies, and previous employers. I hereby release and discharge the County and any other person, firm, agency or corporation from any and all claims and liability which I may have or ever claim to have relating to information provided to the County as part of my application for employment.

If I am offered and accept employment with the County, I understand that my employment is At Will and that my employment may be terminated at any time and for any reason either by me or by the County.

APPLICANT SIGN HERE IN INK \_\_\_\_\_ DATE \_\_\_\_\_  
*M/F DISABLED AND VET EOE EMPLOYER*



**CALHOUN COUNTY TREASURER  
REFERENCE VERIFICATION REQUEST**

1. \_\_\_\_\_ has applied for employment with Calhoun County  
for the position of: \_\_\_\_\_

2. Applicant's Address: \_\_\_\_\_  
\_\_\_\_\_

3. Social Security # (last 4 digits) \_\_\_\_\_

4. Name of Past Employer \_\_\_\_\_

5. Position Held \_\_\_\_\_

6. Dates Employed \_\_\_\_\_

7. Names Employed under \_\_\_\_\_  
(if different than above)

8. I hereby authorize:

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

to release all relevant information to Calhoun County regarding my present and/or past employment, including my job performance, skills and training, health status, and character whether on record or not. I agree to release and hold harmless the above-mentioned individual/institution from liability for any and all damages whatsoever, for issuing such information. I acknowledge and authorize the usage of photocopies of this release to be the same as the original when submitted to the above-mentioned individual/institution.

9. Applicant's Signature \_\_\_\_\_

10. Date \_\_\_\_\_



**CALHOUN COUNTY TREASURER  
REFERENCE VERIFICATION  
REQUEST EMPLOYER SECTION**

By having the applicant sign the attached release, you are authorized to release pertinent employment-related information to us. We appreciate your prompt reply and assure that this information will be kept confidential. Please use the envelope enclosed or fax to 712/297-7479.

Is the information on lines 5 – 7 correct?     Yes         No

If not, please clarify \_\_\_\_\_  
\_\_\_\_\_

Would you re-employ this person?     Yes         No

If not, please explain \_\_\_\_\_  
\_\_\_\_\_

Resignation         Termination

Reason: \_\_\_\_\_

Please rate the applicant in the areas listed below:

	<b>Excellent</b>	<b>Above Average</b>	<b>Average</b>	<b>Poor</b>
Quality of Work				
Quantity of Work				
Caring Attitude				
Reliability & Dependability				
Cooperation & Flexibility				
Attendance & Punctuality				
Works Independently				
Accepts Supervision				
Professional Integrity				
Adheres to Confidentiality				

Comments:

Signature \_\_\_\_\_

Date \_\_\_\_\_