

ACCOUNTANT

*LAST FILING DATE:
09/17/10

OPEN COMPETITIVE EXAMINATION NO. 10 - 10

**SALARY RANGE: \$84,561 - \$108,461

DUTIES: Under the general supervision of the Controller performs general municipal accounting work of a complex nature; maintains and controls a variety of City and Board of Education accounting functions; does related work as required.

MINIMUM TRAINING & EXPERIENCE REQUIRED: Graduation from an accredited college or university with a Bachelor's Degree in Accounting or a closely related field, and five (5) years of progressively responsible experience in accounting of which three (3) years must have been in a supervisory capacity in the public or private sector.

SCOPE OF EXAMINATION: Qualified applicants will be evaluated, scored and ranked on their level and quality of related experience, education and training documented on the application and application supplement. A RESUME AND/OR OTHER CORRESPONDENCE WILL NOT BE CONSIDERED AS EQUIVALENT TO AN APPLICATION. Incomplete applications will not be considered qualified.

*FILING REQUIREMENTS: A completed "City of Stamford Application for Examination or Employment" and "Application Supplement 10-10" and your resume must be submitted or postmarked on or before the last filing date to be considered eligible for purposes of this examination. A RESUME ALONE AND/OR OTHER CORRESPONDENCE WILL NOT BE CONSIDERED AS EQUIVALENT TO AN APPLICATION.

APPLICATION & FURTHER INFORMATION

Visit our website at - www.cityofstamford.org
or contact
City of Stamford Human Resources Division
888 Washington Blvd.- P.O. Box 10152
Stamford, Connecticut 06904-2152
Phone: 203-977-4070
Fax: 203-977-4075
Email: tbarnes@ci.stamford.ct.us

PERSONNEL COMMISSION

Frank Green
Michael Bayonne
Julie Granser
Peter Nanos

Emmet P. Hibson, Director of Human Resources

**Starting salary shall normally be at the lower rate.

ACCOUNTANT
APPLICATION SUPPLEMENT #10 – 10
EXPERIENCE AND TRAINING EXAMINATION

NAME _____

SOCIAL SECURITY NO. _____ 000 - _____ - _____

For this examination, you will be filling out specific information about your education, training and experience. The information that you give will be used to find out how well your background qualifies you for this position. You **MUST** fill out this examination booklet completely in order to take part in this examination. **CONSIDER THIS BOOKLET TO BE AN EXAMINATION.**

On the pages that follow, you will be asked to supply factual information about your education and training and about the duties, responsibilities and accomplishments that are associated with jobs, which helped you qualify for the position for which you are applying. Your education, training and experience will be scored according to how closely they relate to the various job components or factors of the position of *Accountant*. Your score will be based only on what you include in this examination. Incomplete or illegible applications/supplements will be rejected.

This examination booklet and a completed “Application for Examination or Employment” must be filed with the Human Resources Division by the last filing date noted in the job announcement, or bear a postmark no later than the last filing date. Information submitted after the last filing date will not be considered.

AN EOE/AA EMPLOYER

PART I. SUMMARY OF EDUCATION AND EXPERIENCE #10 - 10

Please note that applicants who do not meet the minimum qualifications for *Accountant* will be disqualified.

I. EDUCATION:

A. Do you possess a college degree? (If "Yes", specify the major field of study.

1. Bachelor's Yes____ (Major)_____ No____

2. Master's Yes____ (Major)_____ No____

B. Are you a Certified Public Accountant (C.P.A.)? Yes____ No____

C. Are you a Certified Public Finance Officer (CPFO)? Yes____ No____

II. EXPERIENCE:

A. Please state the length of your work experience in the field of accounting, business, or finance.

Year(s)_____ Month(s)_____

B. Identify (check) and briefly characterize the type of financial experience you have and note the length of time in each field.

1. _____ Accounting, specifically_____

_____. Years____ Months____

2. _____ Business, specifically_____

_____. Years____ Months____

3. _____ Finance, specifically_____

_____. Years____ Months____

C. Identify the type of setting(s) (municipal, corporate, manufacturing, etc.) in which you acquired your experience in accounting, business or finance.

1. _____

2. _____

PART II. EXPERIENCE #10 - 10

Please follow column headings completely. List each job in either Section A, B, C,D, E or F below, as appropriate. Attach additional copies of this page if required. Use whatever terms would best describe the level and scope of your work and responsibility.

A. Describe your work experience in the field of accounting. Also specify the number and title of employees you supervised, if applicable.

DATES & NO. HRS PER WEEK	IDENTIFY EMPLOYER AND TITLE OF SUPERVISOR	YOUR JOB TITLE & DUTIES

B. Describe your work experience in the area of cash flow analyses and investment of funds.

DATES & NO. HRS PER WEEK	IDENTIFY EMPLOYER AND TITLE OF SUPERVISOR	YOUR JOB TITLE & DUTIES

PART II. EXPERIENCE (cont'd) #10 – 10

C. Describe your work experience in the area of debt management.

DATES & NO. HRS PER WEEK	IDENTIFY EMPLOYER AND TITLE OF SUPERVISOR	YOUR JOB TITLE & DUTIES

D. Describe your work experience in the area of fixed asset management.

DATES & NO. HRS PER WEEK	IDENTIFY EMPLOYER AND TITLE OF SUPERVISOR	YOUR JOB TITLE & DUTIES

PART II. EXPERIENCE (cont'd) #10 – 10

E. Describe your work experience in the area of accounts payable.

DATES & NO. HRS PER WEEK	IDENTIFY EMPLOYER AND TITLE OF SUPERVISOR	YOUR JOB TITLE & DUTIES

F. Describe your work experience in the area of accounts receivable.

DATES & NO. HRS PER WEEK	IDENTIFY EMPLOYER AND TITLE OF SUPERVISOR	YOUR JOB TITLE & DUTIES

PART III. TRAINING (cont'd) #10 – 10

A. List all formal training you have received, as well as any informal training you have undertaken within the past five (5) years, including but not limited to, accounting, financial systems, computer training, spreadsheets and databases.

SPECIALIZED TRAINING TITLE OF COURSE	TRAINING ORGANIZATION OR FACILITY	DATES ATTENDED & NO. OF HOURS

PART III. KNOWLEDGE, SKILLS AND ABILITIES

#10 - 10

On the following pages are a variety of statements that are related to this position. For each of those statements, circle the letter for the level described below which best reflects your experience, education or training as it relates to that item.

- A - I have applied this Knowledge, Skill or Ability in an actual setting while performing a job.

- B - I have education or training relevant to this Knowledge, Skill or Ability, but have not applied it in an actual job.

- C - I have little or no experience, education or training relevant to this Knowledge, Skill or Ability.

For each A or B answer, give evidence, in detail, in the space provided of how you acquired the Knowledge, Skill or Ability listed. Evidence may be stated in terms of education/training (list courses and schools) or in terms of experience (list your job duties that apply, name of employer, and dates of work).

KNOWLEDGE, SKILLS AND ABILITIES STATEMENT

1. Knowledge of accounting practices and principles.

Circle the Appropriate Letter

A B C

Employer/School: _____

Dates: _____

Details: _____

2. Ability to prepare complex and financial written reports.

Circle the Appropriate Letter

A B C

Employer/School: _____

Dates: _____

Details: _____

PART III. (cont'd) #10 - 10

KNOWLEDGE, SKILLS AND ABILITIES STATEMENT

3. Knowledge of the following accounting/financial functions: including accounts payable and treasury operations.

Circle the Appropriate Letter

Accounts Payable	A	B	C
Bank Reconciliations	A	B	C
Monthly and Annual Closing Activities	A	B	C

Give a brief explanation for each of these functions: _____

KNOWLEDGE, SKILLS AND ABILITIES STATEMENT

4. Ability to plan, supervise and coordinate the work of subordinate personnel.

Circle the Appropriate Letter

A B C

Employer/School: _____

Dates: _____

Details: _____

5. Ability to utilize various office automation programs such as Microsoft Office including Windows / Word, Excel, and Access; Accounting, Payroll and/or Time and Attendance Systems.

Circle the Appropriate Letter

Windows / Word A B C

Excel A B C

Access A B C

Automated Accounting Systems A B C

Automated Payroll Systems A B C

Automated Time and Attendance Systems A B C

Specify the system you have utilized: _____



APPLICATION FOR EXAMINATION OR EMPLOYMENT

The City of Stamford
Human Resources Division
888 Washington Boulevard
P.O. Box 10152
Stamford, CT 06904-2152
Tel. (203) 977-4070

AN EQUAL OPPORTUNITY EMPLOYER

Position applying for
Use Title on Job Announcement

Exam Number

DO NOT WRITE IN THIS SPACE	
<input type="checkbox"/> Q	Rev. by: _____
<input type="checkbox"/> NQ	_____
<input type="checkbox"/> Educ	_____
<input type="checkbox"/> Exp	_____
<input type="checkbox"/> Not City EE	_____
<input type="checkbox"/> Other	_____
_____	_____
_____	_____
_____	_____

PLEASE TYPE OR PRINT CLEARLY IN BLACK INK.
All blanks must be completed in order for application to be considered.

GENERAL INFORMATION

Name _____
(Last) (First) (Middle)

Address _____
(Street/Apt. #) (City) (State) (Zip Code)

Home Telephone _____ Work Telephone _____
(Area Code) (Area Code)

Cellular Telephone _____ E-mail Address _____
(Area Code)

Social Security Number _____ 000 _____ Best daytime contact: Home Work Cell
(Last six digits ONLY)

Do you claim 5 points preference based on active duty in the U. S. Armed Forces? Yes No
(Attach copy of DD214)

Do you claim 10 points veteran's disability preference? Yes No
(Attach DD214 and supporting documentation)

Have you ever worked for the City of Stamford before? Yes No
If yes, list by dates employed and job title(s): _____

Are you currently authorized to work in the United States? Yes No
Note: 1986 Immigration Reform & Control Act requires verification of identity and employment eligibility at the time of hire.

1. Have you ever been convicted of any offense other than juvenile, youthful offender, or a minor traffic violation? Yes No
If yes, you must complete Section B of the applicant disclosure form.

2. Have you ever been disqualified for a position with the City of Stamford due to a criminal conviction or failure to fully disclose a criminal conviction? Yes No
If yes, list job title and date of disqualification. _____

(Provide information regarding ACTUAL convictions only. Any arrest, charge, conviction and/or record which has been erased, dismissed, nulled or pardoned pursuant to the CGS § 31-51i, should NOT be disclosed. Disclosure of a criminal record will not necessarily disqualify you for employment. Each conviction will be evaluated on its own merits with respect to time, circumstances and seriousness, in relation to the job for which you are applying.)

RECORD OF EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL AND CITY/STATE	DATES ATTENDED	COURSE OF STUDY (Major/Minor)	GRADUATED (Yes/No)	DEGREE, DIPLOMA, G.E.D., AND CERTIFICATE OR CREDITS COMPLETED
HIGH SCHOOL					
COLLEGE OR UNIVERSITY					
COLLEGE OR UNIVERSITY					
COLLEGE OR UNIVERSITY					

Other Training/Certifications (special courses, work training programs, armed forces training) related to the job for which you are applying. Give name and location where training was given, dates attended, subject of training, number of hours weekly, and other details.

Summarize any other Special Skills or Abilities relating to the job you want, such as: licenses, machines you operate, languages which you speak, read and write well, computer skills, and any other special abilities or knowledges.

EMPLOYMENT HISTORY

List below **ALL** present and past employment. **BEGIN WITH YOUR MOST RECENT EMPLOYMENT AND WORK BACKWARDS CONSECUTIVELY.** Applicants may be required to furnish satisfactory proof of employment history claimed. Use additional pages if necessary. Resumes may be included with a **completed application.**

1. Name and Address of Employer _____	Employed From _____ # of hours _____ per week _____	To _____ _____ Ending Salary _____
Supervisor Name, Title, Telephone _____		
Your Title _____		
Describe your duties: _____		

Reason for leaving _____		

EMPLOYMENT HISTORY (Continued)

2. Name and Address of Employer _____ Employed From _____ To _____
of hours _____
per week _____ Last Salary _____
Supervisor Name, Title, Telephone _____
Your Title _____
Describe your duties: _____

Reason for leaving _____

3. Name and Address of Employer _____ Employed From _____ To _____
of hours _____
per week _____ Ending Salary _____
Supervisor Name, Title, Telephone _____
Your Title _____
Describe your duties: _____

Reason for leaving _____

4. Name and Address of Employer _____ Employed From _____ To _____
of hours _____
per week _____ Ending Salary _____
Supervisor Name, Title, Telephone _____
Your Title _____
Describe your duties: _____

Reason for leaving _____

5. Name and Address of Employer _____ Employed From _____ To _____
of hours _____
per week _____ Ending Salary _____
Supervisor Name, Title, Telephone _____
Your Title _____
Describe your duties: _____

Reason for leaving _____

Do you have any objections to the Human Resources Division verifying your work experience and/or educational qualifications?

I hereby authorize the City of Stamford to verify my work experience and/or educational qualifications.

(A) Your former employer? Yes No

(B) Your present employer? Yes No

If answer is "Yes" to either (A) or (B) explain under comments section

Applicant's Signature

COMMENTS

MILITARY INFORMATION

Veteran of U.S. Armed Forces	Service Branch	Date Discharged	Type of Discharge	Final Rank
<input type="checkbox"/> Yes				
<input type="checkbox"/> No				

PRE-EMPLOYMENT STATEMENT (Read Carefully)

I certify that all statements made on or in connection with this application are true, complete, and correct to the best of my knowledge and belief. I understand that incomplete, false, inaccurate, or misleading information given in my application, interview(s) or during the course of my employment may result in the rejection of this application; withdrawal of a job offer; or discipline, up to and including termination of employment. Further, false information provided, whether willingly or accidental, may result in my immediate dismissal if employed, whenever the omission or falsehood is discovered.

I understand that this application is not a contract of employment nor is it a guarantee or indication of employment. I also understand that should I be granted an interview, the representations that may be made at the interview are not to be construed as creating any obligation, promise or contract on behalf of the City. Should I be employed by the City, in consideration of my employment, I agree to conform to the rules and policies of the City of Stamford, as they may from time to time be implemented or revised. Identification and verification of eligibility to work in the United States must be satisfied for employment.

I further understand that in consideration for employment, an investigative background report may be prepared at the request of the City of Stamford by an independent party, whereby information may be obtained from my employers (present or former), educational institutions, all branches of the U.S. Military service, and public records maintained by government agencies or others, including but not limited to criminal conviction reports, credit reports, etc. I authorize the City of Stamford and its designated representative(s) to perform this investigation, and further authorize present and former employers, references and other persons to provide information for the investigation. I also authorize the City of Stamford to receive criminal conviction records pertaining to me which may be in the files of any criminal justice agency.

I understand that acceptance for employment shall depend on satisfactory replies from my references and other background checks. In the event I receive a job offer, I also understand that I will be subject to a drug test and medical examination that I must pass before I commence work.

I have read, understood, and agree to the foregoing.

Applicant's Signature _____

Date _____



City of Stamford

Applicant Disclosure Form

Section A

1. CANDIDATE INFORMATION

It is the policy of the City of Stamford to recruit, hire, and promote qualified people in all job classifications regardless of age, race, sex, color, religion, national origin, marital status, veteran status or disability unless they are bona-fide occupational qualifications.

The following information is needed for compliance with governmental reporting requirements. While completion of this section is voluntary, we strongly urge that all applicants complete this as part of the pre-employment process. Applicants so choosing, may identify on the form that they have chosen not to provide the City of Stamford with the requested information by checking the appropriate box in section four. This information will not affect in any way your employment opportunities. This form will be removed from the application.

2. GENERAL INFORMATION

Your Name _____ Date _____

Social Security Number _____ 000 _____ (Last six digits ONLY)

3. STATISTICAL INFORMATION

Race/Ethnic Identification (Please check one)

American Indian or Alaska Native All persons having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American (Not of Hispanic or Latino origin) All persons having origins in any of the black racial groups of Africa.

Hispanic or Latino All persons of Cuban, Mexican, Puerto Rican, Central or South America, or other Spanish culture or origin, regardless of race.

Native Hawaiian or Other Pacific Islander All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands.

White (Not of Hispanic or Latino origin) All persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Other Please specify _____

Job Classification

Please write the title of the position for which you are applying in the box above, using the title on Job Announcement.

Gender

Female

Male

4. NON-PARTICIPATION

I have read the above statement and have chosen not to complete this form. Please check box if applicable

5. RECRUITING INFORMATION

How did you hear about this job? (Please check one)

Stamford Advocate Human Resources Division Bulletin Board

Other newspaper. Please give name: _____ Community Agency Please give name: _____

City Website Professional journal Please give name: _____

Internet Please give site: _____ Other. Please specify: _____

City Employee



City of Stamford

Applicant Disclosure Form

Section B

NOTE:
THIS INFORMATION WILL BE REVIEWED ONLY BY
MEMBERS OF THE HUMAN RESOURCES DIVISION AND
HIRING MANAGERS.

CRIMINAL CONVICTION INFORMATION

Applicants are required to disclose the existence of *any* criminal conviction, regardless of the nature, date or location thereof, with the exception of minor traffic violations or an arrest, criminal charge, or conviction that has been erased. The types of records subject to erasure under Connecticut law are as follows: (a) a finding of delinquency or that a child was a member of a family with service needs; (b) a sentence as a youthful offender; (c) a criminal charge that was dismissed or "nolled"; (d) a criminal charge for which the person was found not guilty; and (e) a conviction for which the person received an absolute pardon.

The information provided below is subject to the terms of the "Pre-Employment Statement" on Page 4 of this application. A criminal conviction will not necessarily result in the rejection of this application, but will be considered as it relates to the nature of the position sought, and in light of any applicable state and federal law.

Name (Print)

Title of Position Sought

Applicant's Signature

Date

DATE OF CONVICTION	OFFENSE	DATE OF ARREST	PLACE OF ARREST (City/State)	SENTENCE