# California Department of

# Tax and Fee Administration CURRENT

DUTY STATEMENT  PROPOSED

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| SCHEDULE TO BE WORKED/WORKING HOURS | | | EFFECTIVE DATE | |
| CIVIL SERVICE CLASSIFICATION  **Career Executive Assignment (CEA), Level A** | | | WORKING TITLE Chief, Human Resources Bureau | |
| DIVISION/OFFICE/UNIT  **Administration Department/Human Resources Bureau** | | | SPECIFIC LOCATION ASSIGNED TO  **Headquarters - Sacramento, CA** | |
| SEERA DESIGNATION  **Managerial** | | BARGAINING UNIT  **01** | WORK WEEK GROUP  **E** | CERTIFICATES REQUIRED  **None** |
| FINGERPRINTS/BACKGROUND CHECK REQUIRED  Yes No | | BILINGUAL POSITION  Yes  No | SUPERVISION EXERCISED  **Yes** | |
| INCUMBENT | | | POSITION NUMBER *(Agency-Unit-Class-Serial)*  **290-331-7500-001** | |
| *The mission of the California Department of Tax and Fee Administration is to serve the public through fair, effective and efficient tax administration.* | | | | |
| POSITION’S ORGANIZATIONAL SETTING AND MAJOR FUNCTIONS  Under the general direction of the Deputy Director, Administration Division, the Chief, Human Resources Bureau (HRB) is responsible for formulating and recommending policy for the various programs and managing and directing the operations of the Human Resources Bureau including the Workforce Planning, Training and Employee Development, Examination and Recruitment, Classification and Pay, Health and Safety, Performance Management, Labor Relations, and Personnel Transactions Sections. | | | | |
| **Candidate must be able to perform the following essential job functions with or without reasonable accommodation.** | | | | |
| **PERCENTAGE**  **OF TIME SPENT** | **DUTIES** | | | |
|  | **ESSENTIAL JOB FUNCTIONS** | | | |
| 40% | Plans, organizes, evaluates, manages, and establishes priorities for the Human Resources Bureau. Formulates, recommends, and administers department policies and procedures for the implementation of civil service laws, rules, and regulations. Develops effective staff operations and determines strategies to meet the future needs of the California Department of Tax and Fee Administration (CDTFA) through the division’s program areas. | | | |
| 30% | Provides advice and recommendations on policies and procedures involving the administration of all workforce planning, training and employee development, examination and recruitment, classification and pay, health and safety, performance management, labor relations, and personnel transaction issues to the Deputy Director of Administration and/or Executive Management and their staff, other upper-level agency management, and control agencies. Participates in the department’s decision-making process in the areas of program planning, policy formulation, organization coordination and control, and fiscal and personnel management. | | | |
| 10% | Meets with control agencies to establish and maintain effective working relationships involving the Bureau’s programs. Confers, negotiates with, and represents the CDTFA as required before the State Personnel Board (SPB), the California Department of Human Resources (CalHR), and the State Controller’s Office (SCO). | | | |
| 10% | Oversees the preparation of preliminary budget requests for personnel, equipment, and other expenditures. Makes decisions on employee recruitment, personnel resource allocation, performance standards, training plans, organizational changes, and various other activities in the area of human resource management. Initiates and reviews requests for hiring, equipment procurement, and other expenditures. | | | |
|  | **MARGINAL JOB FUNCTIONS** | | | |
| 10% | Handles special projects as directed and performs other job-related duties as required. | | | |

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| **WORK ENVIRONMENT OR PHYSICAL ABILITIES REQUIRED FOR THE JOB** *(if applicable)***:** |
| Work Environment: |
| * High-rise building |
| Physical Abilities: |
|  |
| Additional Requirements/Expectations: |
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| *I have read this duty statement and fully understand that I must perform the Essential Job Functions of my position with or without reasonable accommodation.* |
| |  |  |  | | --- | --- | --- | | PRINT EMPLOYEE NAME | EMPLOYEE’S SIGNATURE | DATE | | ***I certify that the above accurately represents the duties of the position and that I have reviewed these duties with the above named employee.*** | | | | PRINT SUPERVISOR NAME | SUPERVISOR’S SIGNATURE | DATE | |
| |  |  | | --- | --- | | HRB Approval Date: 09/22/14 | C&P Analyst Initials: | |
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