



California Department of Corrections and Rehabilitation
Division of Adult Institutions

DUTY STATEMENT	
Classification: Office Services Supervisor I (G)	Position Number: 028-218-1141-001
Division/Office/Section: Adult Institution/Central Operations/Mailroom	
Location: Chuckawalla Valley State Prison	Supervisory Position: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Collective Bargaining Identifier (CBID): U04	

POSITION DESCRIPTION

Under the direction of Inmate Assignments Lieutenant, the Office Services Supervisor I (OSSI) is responsible for the supervision of all Office Assistants in the mailroom. The OSSI is responsible for problem resolution, office statistics, supply orders, performance evaluations and the daily clerical functions of the Mailroom Office.

ESSENTIAL DUTIES AND RESPONSIBILITIES INCLUDE, BUT ARE NOT LIMITED TO, THE FOLLOWING (other duties may be assigned):

- 35% Organize and direct work of subordinate staff. Complete probationary and annual performance reports, office memorandums and desk procedures. Respond to Request for Interviews and complete First level Inmate Appeal responses when applicable.
- 35% Responsible for supervision of the institution/inmate mail including all legal mail, being alert for any security violations or contraband, and ensuring proper postage on outgoing mail. Monitor incoming mail for money orders or cash, and ensure inmate trust withdrawal forms are completed when applicable.
- 20% Train subordinate staff on specific job assignments; personal computers, SOMS, postage meter procedures, shipping procedures and general office equipment.
- 10% Maintain employee time keeping records. Request maintenance, order supplies and equipment.

Sexual Harassment Policy:

Sexual Harassment is illegal. All staff are required to conform to applicable laws, rules, codes, policies and procedures regarding Sexual Harassment and Equal Employment Opportunity (EEO). References are found in DOM Section 31010.



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**I HAVE DISCUSSED WITH MY SUPERVISOR THE DUTIES OF THE POSITION AND
HAVE RECEIVED A COPY OF THE DUTY STATEMENT.**

EMPLOYEE'S NAME
(Print)

EMPLOYEE'S SIGNATURE

DATE

I HAVE DISCUSSED THE DUTIES OF THE POSITION WITH THE EMPLOYEE.

SUPERVISOR'S NAME
(Print)

SUPERVISOR'S SIGNATURE

DATE

The statements contained in this duty statement reflect general details as necessary to describe the principal functions of this job. It should not be considered an all-inclusive listing of work requirements.