

**DEPARTMENT OF JUSTICE  
DIVISION OF LAW ENFORCEMENT  
BUREAU OF FIREARMS**

**JOB TITLE:** Seasonal Clerk

**STATEMENT OF DUTIES:** The Seasonal Clerk (SC) will perform a variety of routine and less complex duties in accordance with established procedures associated with the various units within the Bureau of Firearms. The SC enters, modifies, updates, and verifies data from various Firearms reports and applications, identifies errors, inconsistencies, and omissions on applications/reports, and, with supervision, takes action to resolve; scans report forms for completeness, assists with clearing dispositions (phone calls, faxing, letters, etc.), and conducting background checks, prepares files and labels, files completed documents/applications for the units, completes draft form letters, opens and distributes mail; assists in unit mail outs; and answers telephones.

**SUPERVISION RECEIVED:** May be directly supervised by a Crime Analyst Supervisor, Staff Services Manager I, or the Assistant Director.

**SUPERVISION EXERCISED:** None.

**ESSENTIAL FUNCTIONS:**

- 35% Review incoming applications/reports for completeness, legibility and accuracy as required by the California Penal and Welfare and Institution Codes; identify errors, inconsistencies, and omissions and, with supervision, takes action to resolve less complex problems.
- 30% Inquire, enter, modify, update, and verify data from aforementioned applications/reports into appropriate database.
- 15% Sort and log incoming mail and distribute to the appropriate individual.
- 10% Sort and file all reports after verification.
- 5% Complete draft form letters.
- 5% Assist in unit mail outs.

I have read and understand the essential functions and typical physical demands required of this job (please check one of the boxes below regarding a Reasonable Accommodation):

I am able to complete the essential functions and typical physical demands of the job without a need for a reasonable accommodation.

I am able to complete the essential functions and typical physical demands of the job, but will require a reasonable accommodation. I will discuss my reasonable accommodation request with my supervisor.

I am unable to perform one or more of the essential functions and typical physical demands of the job, even with a reasonable accommodation.

I am not sure that I will be able to perform one or more of the essential functions and typical physical demands of the job, and will discuss the functional limitations I have with my supervisor.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date