

**AGRICULTURAL LABOR RELATIONS BOARD
DUTY STATEMENT
GENERAL COUNSEL PROGRAM**

PART A	
Position No: 013-240-9519-001 (Bilingual)	Date:
Class: FIELD EXAMINER II	Name: VACANT
Under the general supervision of the Regional Director and direct supervision of the Field Examiner III, the incumbent is independently responsible for the complete process of handling cases of average difficulty in unfair labor practice investigations, representation matters, and compliance related activities.	
Percentage of time performing duties:	ESSENTIAL FUNCTIONS
40%	ULP Matters - Independently investigates ULP cases, interviews parties and witnesses in English and Spanish and takes declarations. Prepares investigative reports, case status reports, and other case-related correspondence. Authority to negotiate independently after supervisory clearance.
20%	Representation Matters - Independently conducts representation elections, pre-election conferences, and post-election challenge ballot investigations. Investigates representation petitions including related objections and challenges. Authority to negotiate independently after supervisory clearance.
20%	Compliance Matters - Independently prepares backpay calculations and make whole specifications on compliance cases.
10%	Office of the Day Duties - Independently meets with the general public, answers inquiries, makes appropriate referrals, conducts interviews in English and Spanish. Writes declarations, takes charges, and docket ULP's and petitions.
5%	Meeting with supervisors, team attorneys, and staff.
5%	Staff training, outreach and other duties as required.

Supervision Received:

Direct Supervision by Field Examiner III. General supervision by Regional Director. Work product is monitored and evaluated on an on-going basis.

Supervision Exercised:

None

Working Conditions:

Travel will be required, and you must possess a valid State of California Driver's License.

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PHYSICAL AND MENTAL REQUIREMENTS OF ESSENTIAL FUNCTIONS					
Position No: 013-250-9519-001 (Bilingual)			Date:		
Class: FIELD EXAMINER II			Name: VACANT		
Activity	Not Required	Less than 25%	25% to 49%	50% to 74%	75% or More
VISION: Reviewing related documents; preparing forms; proofreading documents.					X
HEARING: Answering telephone inquiries and providing verbal information.					X
SPEAKING: Answering inquiries over the telephone and providing verbal information; public speaking at Committee sponsored and other workshops.					X
WALKING: Distributing information and work to be reviewed to supervisory staff; copying				X	
SITTING: Sitting at desk answering telephone inquiries or making telephone calls for clarification of issues.					X
STANDING: When providing public presentations.					X
BALANCING:		X			
CONCENTRATING: Analysis to determine eligibility and feasibility under federal and state regulations; determining appropriate response to written correspondence; determining needs of callers and providing information; preparing staff reports and federal & state documents.				X	
COMPREHENSION: Understanding procedures and policies governing the ALRB; understanding the inquiries from callers.					X
WORKING INDEPENDENTLY: Must be able to work alone without much guidance or interaction from other staff at times.				X	
LIFTING UP TO 10 LBS OCCASSIONALLY: Carrying papers, files from file room to office.			X		
LIFTING UP TO 20 LBS OCCASSIONALLY AND/OR 10 LBS FREQUENTLY:		X			
LIFTING UP 20-50 LBS OCCASSIONALLY AND/OR 25-50 FREQUENTLY:		X			
FINGERING: Pushing buttons on the computer, calculator and telephone.					X
REACHING: Answering telephone.				X	
CARRYING:			X		
CLIMBING:		X			
BENDING AT WAIST:		X			
KNEELING:		X			
PUSHING OR PULLING:		X			
HANDLING: Using computer.				X	
DRIVING:				X	
OPERATING EQUIPMENT: Computer, telephone, xerox machine; fax.					X
WORKING INDOORS: Enclosed office environment.					X
WORKING OUTDOORS:				X	
WORKING IN CONFINED SPACE: Enclosed office environment.				X	

NAME: VACANT

POSITION NUMBER: 013-240-9519-001

PART B

PROSPECTIVE EMPLOYEE RESPONSE

Do you have any physical or mental condition or limitation that will prevent you from performing the essential functions of the position as described above?

- No. I have no physical or mental condition or impairment that would prevent or otherwise impair me from performing the essential functions of the job, as set forth in the job description above.
- No. I do have a physical or mental condition or limitation that will require reasonable accommodation in order for me to be able to perform one or more of the essential functions of the job, as set forth in the job description above.
- Yes. I have a mental or physical condition or limitation that will prevent me from performing one or more of the essential functions of the job, as set forth in the above job description even with reasonable accommodation.
- I am not sure if I have any physical or mental condition or impairment that might prevent or otherwise impair me from performing one or more of the essential functions of the job, as set forth in the above job description.

Note: If you have checked this box, please indicate in the space below the following information:

- (1) the essential function in question, and
- (2) the specific functional limitations you have that you believe may prevent or otherwise impair you from performing that essential function.

You may attach additional pages if necessary. A Personnel Office representative will contact you in order to discuss the matter with you in greater detail. If during this conversation it is determined that a reasonable accommodation may be necessary in order for you to perform the essential function(s) of the job, the representative will discuss that option with you.

CERTIFICATION: I certify that I have provided true and complete information concerning my ability to perform the essential functions as it pertains to above job description. (Any misrepresentation or material omission may be cause for dismissal.)

Applicant's Signature

Date Signed