

## POSITION STATEMENT

1. POSITION INFORMATION	
CIVIL SERVICE CLASSIFICATION:	WORKING TITLE:
Program Technician II	<i>Editor</i>
NAME OF INCUMBENT:	POSITION NUMBER:
<i>Click here to enter text.</i>	208-307-9928-061
OFFICE/SECTION/UNIT:	SUPERVISOR'S NAME:
Fed-State Programs/Editing Unit	
DIVISION:	SUPERVISOR'S CLASSIFICATION:
Labor Market Information	Supervising Program Technician III
BRANCH:	REVISION DATE:
Labor Data and Compliance	1/13/2026
<b>Duties Based on:</b> <input checked="" type="checkbox"/> FT <input type="checkbox"/> PT– Fraction _____ <input type="checkbox"/> INT <input type="checkbox"/> Temporary – _____ hours	
2. REQUIREMENTS OF POSITION	
<b>Check all that apply:</b> <input type="checkbox"/> Conflict of Interest Filing (Form 700) Required <input type="checkbox"/> Call Center/Counter Environment <input type="checkbox"/> May be Required to Work in Multiple Locations <input checked="" type="checkbox"/> Requires Fingerprinting & Background Check <input type="checkbox"/> Requires DMV Pull Notice <input type="checkbox"/> Bilingual Fluency ( <i>specify below in Description</i> ) <input checked="" type="checkbox"/> Travel May be Required <input type="checkbox"/> Other ( <i>specify below in Description</i> )	
<b>Description of Position Requirements:</b> (e.g., qualified Veteran, Class C driver's license, bilingual, frequent travel, graveyard/swing shift, etc.) Occasional travel may be required to attended meetings, trainings, and conferences.	
3. DUTIES AND RESPONSIBILITIES OF POSITION	
<b>Summary Statement:</b> (Briefly describe the position's organizational setting and major functions)	
Under the general supervision of a Supervising Program Technician III, the incumbent will review and edit the Multiple Worksite Report Bureau of Labor Statistics (BLS) 3020 forms received from the employers and will assist employers in completing the BLS 3020 reports in all formats as well as determine accurate accounts status, contact delinquent employers, investigate the sale or purchase of businesses, and identify and track predecessor/successor relationship between businesses. The incumbent will also review employer data using error listings, Out of Balance reports, single and multiple employer micro edits and various other error listings and make appropriate adjustments to the data. Additionally, the incumbent will also assign North American Industry Classification System (NAICS) codes, DE4350 code review, Multiple Establishment Employment Indicator (MEEI) codes and apply standard BLS comment codes. The incumbent will develop an understanding of the Quarterly Census of Employment and Wage (QCEW) system	
<b>Percentage of Duties</b>	<b>Essential Functions</b>
40%	Reviews, verifies, and correct employer data for statistical accuracy by direct contact with employers via telephone or in writing using micro error edits. Works single and multiple employer micro edits, out of balance edits, delinquency edits and requests special edits as needed. Provides guidance to others involved in processing employment & wage data, monitoring work activities, and informing employers of new reporting methods or processes.

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35%	Researches and uses all available data tools and data systems, makes corrections and appropriate business comments to the employer's account in the Exportable QCEW system (QUEST) database system. Monitors the status of the current survey to determine employer response rates, contacts employers for possible sale or purchase of businesses information and identifies predecessor/successor information.
10%	Assists internal and external customers with employment and wage questions concerning the uses and confidentiality of the QCEW data and responds to all request for correction and review of employer status regarding the Multiple Worksite program.
10%	Answers telephone inquiries from internal and external customers concerning Multiple Worksite Report (BLS 3020) forms. Report of Federal Employment and Wages (BLS 3021) forms and Missing Data Notices. Explains the purpose for the data collection, penalties, instructions, and assists in determining a course of action for employers to follow in complying with federal and state regulations and laws. Responds to inquiries from internal and external customers concerning wage and employment information.
<b>Percentage of Duties</b>	<b>Marginal Functions</b>
5%	Performs other duties as assigned.
<b>4. WORK ENVIRONMENT</b> <i>(Choose all that apply)</i>	
Standing: Occasionally - activity occurs < 33%	Sitting: Frequently - activity occurs 33% to 66%
Walking: Occasionally - activity occurs < 33%	Temperature: Temperature Controlled Office Environment
Lighting: Artificial Lighting	Pushing/Pulling: Occasionally - activity occurs < 33%
Lifting: Occasionally - activity occurs < 33%	Bending/Stooping: Occasionally - activity occurs < 33%
Other: <i>Click here to enter text.</i>	
<b>Type of Environment:</b>	
<input type="checkbox"/> High Rise <input checked="" type="checkbox"/> Cubicle <input type="checkbox"/> Warehouse <input type="checkbox"/> Outdoors <input type="checkbox"/> Other:	
<b>Interaction with Customers:</b>	
<input type="checkbox"/> Required to work in the lobby <input type="checkbox"/> Required to work at a public counter <input checked="" type="checkbox"/> Required to assist customers on the phone <input type="checkbox"/> Required to assist customers in person <input checked="" type="checkbox"/> Other: Telework	
<b>5. SUPERVISION EXERCISED:</b>	
<i>(List total per each classification of staff)</i>	
None	
<b>6. SIGNATURES</b>	
<b>Employee's Statement:</b>	
<i>I have reviewed and discussed the duties and responsibilities of this position with my supervisor and have received a copy of the Position Statement.</i>	
Employee's Name: <i>Click here to enter text.</i>	
Employee's Signature:	Date:
<b>Supervisor's Statement:</b>	
<i>I have reviewed the duties and responsibilities of this position and have provided a copy of the Position Statement to the employee.</i>	
Supervisor's Name:	

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Supervisor's Signature:		Date:	
<b>7. HRSD USE ONLY</b>			
<b>Classification and Pay Group (C&amp;P) Approval</b>			
<input checked="" type="checkbox"/> Duties meet class specification and allocation guidelines.	C&P Analyst Initials	Date Approved	
<input type="checkbox"/> Exceptional allocation, STD-625 on file.	JMB	4/30/2026	
<b>Reasonable Accommodation Unit use ONLY</b> <i>(completed after appointment, if needed)</i> <i>If a Reasonable Accommodation is necessary, please complete a Request for Reasonable Accommodation (DE 8421) form and submit to Human Resource Services Division (HRSD), Reasonable Accommodation Coordinator.</i> List any Reasonable Accommodations made:			

**Supervisor:** After signatures are obtained, make 2 copies:

- Send a copy to HRSD (via your Attendance Clerk) to file in the employee's Official Personnel File (OPF)
- Provide a copy to the employee
- File original in the supervisor's drop file