

**DEPARTMENT OF JUSTICE
DIVISION OF ADMINISTRATIVE SERVICES
LEGAL SUPPORT OPERATIONS
OAKLAND
DUTY STATEMENT**

NAME:

JOB TITLE: Seasonal Clerk

POSITION NUMBER: 420-032-1120-901

STATEMENT OF DUTIES: The Seasonal Clerk will provide light clerical and administrative assistance to members of the Flexible Administrative Support Team, Legal Support management, and legal secretaries.

SUPERVISION RECEIVED: Under the general direction of the Supervisor I and the close supervision of the Legal Support Supervisor I or Business Services Officer (Supervisor).

SUPERVISION EXERCISED: None.

TYPICAL PHYSICAL DEMANDS & WORKING CONDITIONS: Employee may be required to perform tasks that require bending/stooping, carrying/lifting up to 25 pounds, climbing, kneeling, reaching/twisting, manual dexterity (grasping/keyboarding), pushing/pulling, prolonged standing/sitting, frequent walking. Employee is expected to use natural or assisted bearing and vision and be able to speak in a clear and professional manner in English to the public, clients and co-workers either in person or over the telephone. Employee works at a desk or in a cubicle in a workspace that may or may not have a window. More than one person may be assigned to the same workspace. The office occupies two upper floors in a high-rise building, as well as space on the third and tenth floors and in the basement. The building is a smoke-free environment.

ESSENTIAL FUNCTIONS:

40% Legal Support

Setup, update and close case files. Create indexes of case files by reviewing exhibits and pleadings. Ensure transcripts are processed. Prepare travel expense claims, schedule appointments, meetings, and conference calls. Route court documents including Service of Process to appropriate staff.

40% Business Services Support

Provide coverage in reception and the mailroom as needed. Copy and scan documents, and deliver supplies.

20% Marginal Functions

Assist members of the FAST with special reports, events and projects; perform other business service/legal support functions as needed.

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's Signature Date

Supervisor's Signature Date