



JOB POSTING

HELP DESK SUPPORT

- COMPANY:** Sierra Telephone
- DEPARTMENT:** Information Systems
- FLSA STATUS:** Non-Exempt
- REPORTS TO:** Information Systems Supervisor
- LOCATION:** Oakhurst
- DEADLINE:** Open until filled
- HOURS:** Full-time work schedule; 8:00 a.m. to 5:00 p.m., Monday through Friday. This position may be subject to call-out during weekends and evenings as needed.
- NUMBER OF POSITIONS TO BE FILLED:** One

GENERAL SUMMARY

This position is responsible to maintain and administer all help desk related activities.

ESSENTIAL JOB FUNCTIONS

- ◆ Resolve all internal help desk requests.
- ◆ Install network devices including computers and printers.
- ◆ Install and upgrade software for corporate and client needs.
- ◆ Repair, troubleshoot, and maintain Intel-based microcomputers.
- ◆ Regular and predictable on-site attendance is an essential function of the job.

OTHER RELATED JOB FUNCTIONS

- ◆ Perform other duties as needed.

QUALIFICATIONS

Education and/or Experience

- ◆ Associate degree or equivalent from a two-year college or technical school.
- ◆ One year related experience and/or training, or equivalent combination of education and experience, of technical personal computer bench work and help desk support in a networking environment.

NOTE: These statements are intended to describe the general nature and level of work being performed by employees in this position, and are not to be construed as an exhaustive list. In addition, they do not establish an employment contract, as employment with Sierra Tel is always at-will.

45-04022019

Certificates, Licenses, Registrations

- ◆ Must have a valid Class C California driver's license with a minimum of three years of driving experience.
 - ~ Driving experience must have occurred after having passed a traffic laws and signs test.
 - ~ If relocating to California from another state or country, must have, at a minimum, a valid driver's license issued by the home state equivalent to a California Class C. The employee will be required to obtain a California driver's license within ten days.
 - ~ Must be insurable via the Company's standard auto insurance policy procedures.
- ◆ A+ and/or Network+ certification preferred.
- ◆ Microsoft Certified Professional (MCP) or better desired.

Knowledge, Skills, and Abilities

- ◆ Knowledge of
 - ~ Work group applications.
- ◆ Skill to
 - ~ Effectively communicate verbally, in writing, and interpersonally.
 - ~ Proficiently read, write, use proper grammar, edit, and proofread.
 - ~ Plan and organize multiple tasks and projects under deadline pressure.
- ◆ Ability to
 - ~ Maintain the highest degree of confidentiality regarding customer and Company information.
 - ~ Learn additional Company, department, and network software applications, operating systems, and hardware.
 - ~ Work independently with minimal supervision, and use available information to make independent decisions related to specific job duties.
 - ~ Calmly and professionally, work with a variety of people and personalities.
 - ~ Adapt to changes in procedures and responsibilities.
 - ~ Project a professional image in conduct, attire, grooming, and manner of speech.
 - ~ Maintain paperwork in a neat, organized manner.
 - ~ Maintain a high level of accuracy and attention to detail.
 - ~ Follow instructions completely and accurately.
 - ~ Travel when required.

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PHYSICAL REQUIREMENTS

The physical requirements described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

	0 – 24%	25 – 49%	50 – 74%	75 – 100%
Seeing: must be able to read a computer screen and paper documents.				X
Hearing: must be able to hear well enough to communicate in person and over the telephone with customers, coworkers, and industry contacts.				X
Standing/Walking		X		
Climbing/Stooping/Kneeling		X		
Lifting/Pulling/Pushing	X			
Fingering/Grasping/Feeling: must be able to write, type, and use phone system.				X

- ◆ Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and ability to adjust focus.
- ◆ The employee must regularly lift and/or move up to 50 pounds and occasionally lift and/or move more than 100 pounds.

SAFETY COMPLIANCE

Safety is an integral part of our business and the responsibility for safety extends to every employee. Your responsibility toward safety at the workplace includes, but is not limited to:

- ◆ Proactive involvement in the Company's Safety Program, including compliance with all rules and regulations.
- ◆ Use safe work practices while performing all duties.

WORK ENVIRONMENT

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- ◆ The employee may occasionally be exposed to the risk of electrical shock.
- ◆ The employee occasionally works near moving mechanical parts and is occasionally exposed to vibration.
- ◆ The employee may regularly be exposed to diesel and gasoline fumes, airborne particulates, toxic or caustic chemicals, and other hazardous substances.
- ◆ The position functions indoors in a controlled office environment.
- ◆ The noise level in the work environment is usually moderate.

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APPLICATION INSTRUCTIONS

Please complete the Application for Employment form below. Entries outlined with a red box are required. Save the form on your computer and attach it to an email addressed to careers@sierratel.com. (A link is provided on the Employment page next to the job title.) It is preferable to include a resume and cover letter with the application.

For questions or additional information, you are welcome to call 559-642-0200.

Open until filled
www.sierratel.com/employment

This institution is an equal opportunity provider and employer.

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APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE THIS APPLICATION YOURSELF, GIVING ANSWERS TO THE QUESTIONS WHICH APPLY TO YOU.

Name _____ Date _____

Address _____ Contact Telephone _____

City, State, Zip _____ Home Telephone _____

How long have you lived at current address Years _____ Months _____ Have you previously worked for our company Yes No

Position applied for _____ Have you previously applied with our company Yes No

Email Address _____ Date available to start _____

Do you have any relatives currently employed by our company? Yes No Name _____

Do you wish to work: Full Time; Part time? If part time, hours or days _____

Have you ever held this position or done this kind of work before? Yes No

How did you hear about this position? _____

Record of Employment

PRESENT (OR MOST RECENT) EMPLOYER: May we contact your present employer about this application? _____

Company _____ Type of Business _____

Address _____ Phone _____

WHEN YOU STARTED	CURRENTLY OR WHEN YOU LEFT	NAME OF LAST SUPERVISOR
Date _____	Date _____	_____
Description of job _____ _____ _____	Description of job _____ _____ _____	Title _____ Reason for leaving _____ _____

PREVIOUS EMPLOYER

Company _____ Type of Business _____

Address _____ Phone _____

WHEN YOU STARTED	CURRENTLY OR WHEN YOU LEFT	NAME OF LAST SUPERVISOR
Date _____	Date _____	_____
Description of job _____ _____ _____	Description of job _____ _____ _____	Title _____ Reason for leaving _____ _____

PREVIOUS EMPLOYER

Company _____ Type of Business _____

Address _____ Phone _____

WHEN YOU STARTED	CURRENTLY OR WHEN YOU LEFT	NAME OF LAST SUPERVISOR
Date _____	Date _____	_____
Description of job _____ _____ _____	Description of job _____ _____ _____	Title _____ Reason for leaving _____ _____

If More Than Two Previous Employers, List Others Here

Employment Dates From To	Company and City/State	Position or Type of Work	Reason for Leaving

Education or Training Experience

School	Name of School	City, State	Major Course or Subject	Did you Graduate? Degree?
High School				
College or University				

Special Skills, Licenses, or Certifications

Motor Vehicle Record

Do you currently hold a valid Drivers License? <input type="checkbox"/> Yes <input type="checkbox"/> No State _____ Class _____
License Number _____ Date Expires _____ Restrictions _____

List three business/work references. Do not list relatives, your current supervisor, or previous supervisors.

Name	Address, City, State	Relationship/Years Known	Phone/E-mail

Have we missed something important?

Please use the space below to inform us of any special activity, awards, or other information that may help us to understand your skills and abilities for this job.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. It is the Company's policy (and required by state and federal law) to provide equal opportunity to all persons without regard to race, color, religion, sex, pregnancy, marital or domestic partner status, sexual orientation, gender identity or expression, age, ancestry, national origin, disability, genetic information, or medical condition, as defined in state and federal laws. This policy covers all aspects of employment, including, but not limited to, recruitment, selection, training, promotion, transfer, compensation, demotion, and termination. Persons denied employment based on above conditions may file a complaint with our Company and/or with state or federal authorities.

APPLICANT’S STATEMENT

I certify that the information in this application and any attachments are true and complete to the best of my knowledge, and I agree to have these statements verified by the Company. I understand that any misrepresentation or material omission may result in my failure to receive an offer or, if I am hired, in my termination.

I authorize my references and supervisors, and other representatives of any former employer to provide information concerning my previous employment, including responding to verbal or written inquiries from the Company or its affiliates regarding all my employment records, including, but not limited to, work performance, disciplinary records, reliability, reasons for terminating my employment, and any incidents of dishonesty, insubordination, violence, and/or unsafe, harmful or threatening behavior, including information based upon materials in my personnel files. I release all parties, including former employers and their representatives, and the Company, from any and all liability for damages that may result from the furnishing of such information, as well as from the use of or disclosure of such information by the Company or its agents.

I UNDERSTAND AND AGREE THAT MY EMPLOYMENT CAN BE TERMINATED AT WILL, WITH OR WITHOUT CAUSE, AND WITHOUT NOTICE, AT ANY TIME, EITHER AT MY OPTION OR AT THE OPTION OF THE COMPANY.

I understand that no representative of the Company or its affiliates, other than the President or Vice President Operations, has the authority to agree to the contrary. Further, the President or Vice President Operations may not alter the at-will nature of the employment unless done so specifically in writing, signed by both the President or Vice President Operations and me.

I understand that I am required to abide by all policies, rules and regulations of the employer.

I understand that all offers of employment are conditioned on my providing satisfactory proof of my identity and legal right to work in the United States.

I understand that in connection with the application process Sierra Telephone or Sierra Cellular may request information from a "Consumer Reporting Agency."

Applicant’s Name _____ Date _____
(Print)

Applicant’s Signature _____

By checking this box, I acknowledge that I have carefully read and understand the above **Applicant’s Statement**. I expressly agree that this acknowledgement may be provided by electronic means pursuant to the Uniform Electronic Transactions act (UETA) for the Electronic Signatures in Global and National Commerce Act (E-SIGN).