Federal Work Study
Job Description Form

Job Title: Office Assistant/Receptionist
Department or Organization: Thrive Student Resource Center

Supervisor: Nelson Lopez
Office: Frost 224
Phone: 413-552-2349
Email: nlopez@hcc.edu

Designee: Rosemary Fiedler
Office: Frost 233
Phone: 413-552-2785
Email: rfiedler@hcc.edu

General Job Description:
Greet and assist students and community members; schedule appointments and provide general information, and support daily office duties.

Detailed List of Duties:
Greet and assist guests, answer phones and take clear messages, schedule appointments and manage calendars. Prepare and distribute mailings. Use copier and fax machine. Support outreach and marketing efforts. Maintain files and database using MS Office and other software. General office work and other duties as assigned by Coordinator.

Opportunities for Advancement: Please list those duties an employee can expect to learn in terms of job growth, if rehired. This position will provide a learning environment for enhancing communication skills (written, verbal, and interpersonal), organizational skills, and office etiquette and professionalism.

Responsibility Involved: Consider responsibility for direction of others, service to the public, equipment or materials used, and the amount of confidentiality required.
Must maintain confidentiality at all times as stated in the Confidentiality Agreement.

Skills and/or previous experience desired:
Willingness to assist a diverse population. Polite, professional, and pleasant attitude; effective interpersonal skills; telephone skills; computer skills and accuracy in typing; proofreading with attention to detail; and clerical skills such as filing and data entry.

Amount of supervision required:
☐ Regular □ Occasional □ Minimal
Student employees are not permitted to work without any supervision.

Hours desired to cover (evening, weekend, etc.):

How to Apply: Contact supervisor/designee listed above.

Completed and Submitted By:

__________________________   __________________________   __________________________
Print Name of Supervisor    Title        Date

Please return completed form to twonders@hcc.edu