# State of Michigan Civil Service Commission

Capitol Commons Center, P.O. Box 30002
Lansing, MI 48909

| Position Code |  |
|---------------|--|
| 1. STUDASTE   |  |

## **POSITION DESCRIPTION**

| This position description serves as the official classification document of record for this position. Please complete the information as accurately as you can as the position description is used to determine the proper classification of the position. |  |
|--|--|
| 2. Employee's Name (Last, First, M.I.)   | 8. Department/Agency   |
|  | DEPT OF INS AND FIN SERVICE  |
| 3. Employee Identification Number  | 9. Bureau (Institution, Board, or Commission)                          |
|  | Insurance Licensing and Market Conduct                                 |
| 4. Civil Service Position Code Description   | 10. Division   |
| STUDENT ASSISTANT-E  |  |
| 5. Working Title (What the agency calls the position)  | 11. Section  |
| Student Assistant  |  |
| 6. Name and Position Code Description of Direct Supervisor   | 12. Unit   |
| BOYNTON, ADRYNE C; DEPARTMENTAL MANAGER-3  |  |
| 7. Name and Position Code Description of Second Level Supervisor   | 13. Work Location (City and Address)/Hours of Work                     |
| HUISKEN, JILL A; STATE ADMINISTRATIVE MANAGER-1  | 611 W OTTAWA ST; LANSING, MI 48915 / Monday-Friday,<br>8:00 am-5:00 pm |

#### 14. General Summary of Function/Purpose of Position

The student will assist the Licensing Section with a variety of regularly assigned and ad hoc projects related to the operation of the section. This position will be using skills in Microsoft Office (Word, Excel, Outlook) and various other computer programs. With direction from the Licensing Section Management Team, will assist with maintenance of electronic files, incoming mail, customer service, data entry and other special projects.

15. Please describe the assigned duties, percent of time spent performing each duty, and what is done to complete each duty.

List the duties from most important to least important. The total percentage of all duties performed must equal 100 percent.

Duty 1

General Summary: Percentage: 100

Assist the Insurance Licensing Section with a variety of administrative duties

Individual tasks related to the duty:

- Provide administrative support as needed.
- Assist in maintenance of licensing records.
- Enter, retrieve, update and verify information from electronic files.
- Input data on various databases.
- Sort, open and distribute incoming mail to section staff.
- Maintain confidentiality of documents and information received.
- Assist with return mail.
- Assist with providing customer service, as needed.
- Complete special projects as assigned.

16. Describe the types of decisions made independently in this position and tell who or what is affected by those decisions.

Any independent decisions made would be those conducting routine tasks.

17. Describe the types of decisions that require the supervisor's review.

Decisions not covered by supervisor directive, policies or guidelines.

18. What kind of physical effort is used to perform this job? What environmental conditions in this position physically exposed to on the job? Indicate the amount of time and intensity of each activity and condition. Refer to instructions.

Position duties and tasks are performed in a traditional office environment which includes considerable sitting, occasional standing, limited lifting, microcomputer usage and normal office routines.

19. List the names and position code descriptions of each classified employee whom this position immediately supervises or oversees on a full-time, on-going basis.

**Additional Subordinates** 

20. This position's responsibilities for the above-listed employees includes the following (check as many as apply):

N Complete and sign service ratings. N Assign work.

N Provide formal written counseling. N Approve work.

N Approve leave requests. N Review work.

N Approve time and attendance. N Provide guidance on work methods.

N Orally reprimand. N Train employees in the work.

22. Do you agree with the responses for items 1 through 20? If not, which items do you disagree with and why?

I agree.

#### 23. What are the essential functions of this position?

The student will assist the Licensing Section with a variety of regularly assigned and ad hoc projects related to the operation of the section.

24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.

Update PD to better reflect current duty and tasks. General summary and duty/tasks updated by current manager.

### 25. What is the function of the work area and how does this position fit into that function?

The Insurance Licensing Section is responsible for administering licensing programs for individuals and business entities, including, insurance producers, solicitors, adjusters, counselors, premium finance companies, and reinsurance intermediaries. The student will assist the Licensing Section with a variety of regularly assigned and ad hoc projects related to the operation of the section.

| 26. What are the minimum education and experience qualification   | is needed to perform the essential functions of this position.         |
|---|--|
| EDUCATION:  |  |
| Current enrollment in high school, vocational or technica   | ıl school, or post-secondary educational institution.                  |
| EXPERIENCE:   |  |
| <b>Student Assistant A</b><br>No specific type or amount is required.   |  |
| KNOWLEDGE, SKILLS, AND ABILITIES:   |  |
| - Ability to follow oral and written instructions.  |  |
| - Ability to communicate effectively with others.   |  |
| - Ability to operate microcomputer.   |  |
| CERTIFICATES, LICENSES, REGISTRATIONS:  |  |
| None.   |  |
| NOTE: Civil Service approval does not constitute agreement with or acceptance of the desired qualifications of this position. |  |
| TO BE EILLED OUT BY AS  | PROINTING AUTHORITY  |
| TO BE FILLED OUT BY AF  | PPOINTING AUTHORITY  |
| Indicate any exceptions or additions to the statements of emplo   | oyee or supervisors.   |
| N/A   |  |
| I certify that the entries on these pages are accura  | te and complete.   |
| ERMELINDA GARZA   | 9/2/2025   |
| Appointing Authority  | Date   |
|   |  |
| I certify that the information presented in this position of the duties and responsibilities assigned to this p               | ition description provides a complete and accurate depiction position. |
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