# **Good Shepherd Lutheran Church Ministry Description**

Ministry Title: Accounting Specialist Reports to: Parish Administrator

Ministry Description: The Accounting Specialist performs accounting duties and provides assistance to the Parish Administrator.

# **Primary Responsibilities**

# **Accounting Functions:**

Process accounts payable, accounts receivable, journal entries, and semi-monthly payroll. Process transactions for the dedicated funds, benevolence fund and endowment fund as needed. Work with Financial Specialist to process the weekly offering which includes processing checks, prepare deposit to proper accounts and transport deposit to bank, review Vanco reports and upload deposits to QuickBooks. Work in conjunction with the Parish Administrator on monthly and yearly financial report processing, maintaining current chart of accounts and review of account coding on expense vouchers and credit card statements. Process quarterly payroll reporting and complete end of year W-2 and 1099 processing.

# **Stewardship Functions:**

Assist all congregation members with current giving options. Run and review reports for the processing of member contributions in the ICON financial software system. Complete distribution of member quarterly contribution reports. Responsible for the gathering, verifying and recording of pledge cards for the fall stewardship program.

# **Meetings & Administration:**

Attend staff meetings and committee meetings as needed.

# **Member Relations**:

Work with Parish Administrator in responding to contributor's questions or concerns as appropriate

#### **General support:**

Assist others in meeting the overall needs of the congregation and beyond. Fill in for others as the need arises and as priorities and workloads require.

### **Personal & Spiritual Growth:**

Engage in the ministry of self-care through personal and spiritual growth. Nurture spiritual growth through prayer, worship services, reading, attending educational conferences and other avenues personally chosen to foster this growth.

# **Education and Experience Desired**

Associate degree in Accounting or a related field plus a minimum of five years' experience deemed equivalent to the requirements aforementioned.

# Talents and Gifts needed for this Ministry

A heart and desire to lead God's people in ministry that supports the vision and mission of the church. A heart and desire to effectively support the church's financial functions. Skills in organization, time management, communication, teamwork, and computer use are required. The ability to maintain a high level of confidentiality is a must. Self motivation and ability to determine priority needs from routine tasks is essential. Microsoft Office Professional Suite including Word and Excel are preferred. QuickBooks accounting software and fund accounting knowledge is a requirement.

# **Examples of Working Conditions**

A part-time position (20 hours per week) with no eligibility for benefits. Typical work schedule is Mon and Tuesday (8-4) and Wednesday (8-3) with a one hour lunch break. This is a flexible position and can accommodate most schedules. Good Shepherd will provide encouragement and uphold the Accounting Specialist with our prayers and support.

# **GOOD SHEPHERD LUTHERAN CHURCH**





| APPLICANT INFORMATION  | l                      |  |         |                |              |            |      |                  |  |  |  |
|--|------------------------|--|---------|----------------|--------------|------------|------|------------------|--|--|--|
| Last Name  |                        |  | First   |                |              |            | M.I. | Date             |  |  |  |
| Street Address   |                        |  |         |                |              |            |      | Apartment/Unit # |  |  |  |
| City   |                        |  |         | State          |              |            |      | ZIP              |  |  |  |
| Phone  |                        |  |         | E-mail Address |              |            |      |                  |  |  |  |
| Date Available   |                        |  |         | Des            |              |            |      | sired Salary     |  |  |  |
| Position Applied for   | '                      |  |         |                |              |            |      |                  |  |  |  |
| Are you authorized to work in the  | United States?         |  | YES     | NO             |              |            |      |                  |  |  |  |
| Have you ever worked for this company? YES NO If so, when?   |                        |  |         |                |              |            |      |                  |  |  |  |
| Have you ever been convicted of a felony? YES NO If yes, explain.  |                        |  |         |                |              |            |      |                  |  |  |  |
| (An affirmative answer will not automatically disqualify you from consideration for the position for which you are applying. Factors such as age of the conviction, time of events, seriousness and nature of the violation, and rehabilitation are taken into account.) |                        |  |         |                |              |            |      |                  |  |  |  |
|  |                        |  |         |                |              |            |      |                  |  |  |  |
| EDUCATION  |                        |  |         |                |              |            |      |                  |  |  |  |
| High School  |                        |  | Address |                |              |            |      |                  |  |  |  |
| Did you graduate? YES NO Degree  |                        |  |         |                |              |            |      |                  |  |  |  |
| College  |                        |  | Address |                |              |            |      |                  |  |  |  |
| From To  | m To Did you graduate? |  |         | YES NO Degree  |              |            |      |                  |  |  |  |
| Other A  |                        |  | Address |                |              |            |      |                  |  |  |  |
| From To Did you graduate?  |                        |  | YES     | NO             | NO Degree    |            |      |                  |  |  |  |
|  |                        |  |         |                |              |            |      |                  |  |  |  |
| REFERENCES  Please list 3 professional reference   |                        |  |         |                |              |            |      |                  |  |  |  |
| 1) Full Name   |                        |  |         |                | Re           | lationship |      |                  |  |  |  |
| Company  |                        |  |         | Phone          |              |            |      |                  |  |  |  |
| Address  |                        |  |         |                |              |            |      |                  |  |  |  |
| 2)Full Name  |                        |  |         |                | Relationship |            |      |                  |  |  |  |
| Company  |                        |  |         | Phone          |              |            |      |                  |  |  |  |
| Address  |                        |  |         |                |              |            |      |                  |  |  |  |
| 3)Full Name  |                        |  |         |                | Relationship |            |      |                  |  |  |  |
| Company  |                        |  |         | Phone          |              |            |      |                  |  |  |  |
| Address  |                        |  |         |                |              |            |      |                  |  |  |  |

| PREVIOUS EMP  | PLOYMENT                  |                       |                    |                        |                                       |  |  |  |
|---|---------------------------|-----------------------|--------------------|------------------------|---------------------------------------|--|--|--|
| Company   |                           |                       |                    | Phone ( )              |                                       |  |  |  |
| Address   |                           |                       |                    | Supervisor             |                                       |  |  |  |
| Job Title Star  |                           |                       | Starting Salary    | \$                     | Ending Salary \$                      |  |  |  |
| Responsibilities  |                           |                       |                    |                        |                                       |  |  |  |
| From To Reason for Leaving                                      |                           |                       |                    |                        |                                       |  |  |  |
| May we contact your previous supervisor for a reference?  YES   |                           |                       | NO                 |                        |                                       |  |  |  |
| Company   |                           |                       | Phone ( )          |                        |                                       |  |  |  |
| Address   |                           |                       | Supervisor         |                        |                                       |  |  |  |
| Job Title   | Starting Sala             |                       |                    | \$                     | Ending Salary \$                      |  |  |  |
| Responsibilities  |                           |                       |                    |                        |                                       |  |  |  |
| From To Reason for Leaving                                      |                           |                       |                    |                        |                                       |  |  |  |
| May we contact your previous supervisor for a reference? YES    |                           |                       | NO                 |                        |                                       |  |  |  |
| Company   |                           |                       | Phone ( )          |                        |                                       |  |  |  |
| Address   |                           |                       | Supervisor         |                        |                                       |  |  |  |
| Job Title St  |                           |                       | Starting Salary    | \$                     | Ending Salary \$                      |  |  |  |
| Responsibilities  |                           |                       |                    |                        |                                       |  |  |  |
| From  | rom To Reason for Leaving |                       |                    |                        |                                       |  |  |  |
| May we contact your previous supervisor for a reference? YES NO |                           |                       |                    |                        |                                       |  |  |  |
|   |                           |                       |                    |                        |                                       |  |  |  |
| OTHER   |                           |                       |                    |                        |                                       |  |  |  |
| Are there any other activities? (You may                        |                           |                       |                    |                        | ssional, business, volunteer or civic |  |  |  |
| Are you aware of an   | y reason why you          | cannot perform the    | essential function | s of the job for which | you are being considered?             |  |  |  |
| State any additional  | information you fo        | eel may be helpful to | us in considering  | your application.      |                                       |  |  |  |

| DISCLAIMER AND SIGNATURE   |
|--|
|  |
| This application will be considered active for a maximum of 30 days. If you wish to be considered for employment after that time, you must reapply.  |
| The information provided is true and complete to the best of my knowledge. I understand that a misrepresentation or omission by me on this application or during the interview process will be cause for cancellation of the application or dismissal, if employed.  |
| I authorize Good Shepherd Lutheran Church to verify the information contained in the application. I further authorize and request that all of my present and former employers and those individuals I have listed as professional references furnish information about my employment record, including a statement of the reason for the termination, work performance, abilities, and other qualities pertinent to my qualification for employment, hereby releasing them from any and all liability for damages arising from furnishing the requested information. |
| I also understand that I will be required to abide by all rules and regulations of the employer as they now exist and as they are amended from time to time at the church's sole option. Any offer I receive from the church is contingent upon my successful completion of the church's total pre-employment screening process. I acknowledge that for certain jobs I may be required to submit to pre-employment drug testing. Compliance is a requisite for employment.   |
| I understand that I will not have a contract of employment between myself and Good Shepherd Lutheran Church, for any specified period of time. I also understand that subject to applicable laws, the employment relationship is an "At will" relationship, as such, it may be terminated by myself, or by Good Shepherd Lutheran Church, at any time, for any reason and with or without notice. This application is not an offer of employment   |
| Signature: Date:   |
|  |
|  |
|  |