



**OAHU REGION  
HAWAII HEALTH SYSTEMS CORPORATION**

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**VACANCY ANNOUNCEMENT  
CONTINUOUS RECRUITMENT UNTIL NEEDS ARE MET**

**DATE POSTED:** JUNE 1, 2021  
**JOB TITLE:** CLERK II (Temporary, Full-time with Benefits)  
**RECRUITMENT NO:** OR 09-21  
**JOB LOCATION:** MALUHIA, KALIHI/KAPALAMA/PALAMA, HONOLULU, OAHU\*  
**SALARY RANGE:** \$2,653.00 per month (SR-06)

**Position may be extended or converted to Permanent with Management Approval.**

**DUTIES:** The Clerk II performs screening functions and a variety of clerical tasks under the direct supervision of a higher level Nursing staff. Maintains strict confidence regarding information on residents, staff, etc.

**\*The incumbent of this position may also provide services at Leahi Hospital.**

**MINIMUM QUALIFICATIONS:**

**Experience Requirements:** One half (1/2) year of work experience which involved performance of clerical tasks which demonstrated knowledge of English grammar; spelling; arithmetic; ability to read and understand oral and written instructions; ability to write simply and directly; and ability to compare words and numbers quickly and accurately.

**General Clerical Experience:** Work experience which involved performance of a variety of clerical tasks which demonstrated knowledge of English grammar, spelling, arithmetic, common office appliances and equipment; and the ability to read and understand oral and written instructions, carry out procedures in clerical work systems, speak and write simply and directly, compare words and numbers quickly and accurately, operate various kinds of office equipment.

**Supplemental Forms:** Applicants must submit at the time of application, the **Supplement For Clerical.**

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***ALL JOB VACANCIES WILL BE POSTED FOR A MINIMUM OF TEN (10) CALENDAR DAYS.***

***An Equal Opportunity Employer***

**QUALITY OF EXPERIENCE:** Possession of the required amount of experience will not in itself be accepted as proof of qualification for the position. Overall paid or unpaid experience must have been of such scope and responsibility as to conclusively demonstrate that you have the ability to perform the duties of this position. Provide a detailed description of your duties and responsibilities. If you worked on a part-time basis, indicate the average number of hours worked per week. Please note that experience will be based on a 40-hour workweek.

**Note:** We will not postpone the recruitment process because of your failure to provide accurate and complete information concerning your qualifications.

**MERIT OR CIVIL SERVICE SYSTEM:** Applicants must meet the minimum qualification requirements, including education, experience, other public employment requirements for State Civil Service employment, and HHSC Standards of Fitness. Only those applicants that are scheduled for an interview with the hiring manager will be contacted. Applications will be kept active for six (6) months.

**CITIZENSHIP AND RESIDENCE REQUIREMENT:** Applicants must be eligible to work in the U.S. and at the time of appointment intend to reside in the State of Hawaii during the course of employment with the Hawaii Health Systems Corporation.

**VETERAN'S PREFERENCE:** If you are claiming Veteran's Preference, you must submit a copy of your DD214 and/or other substantiating documents specifying the periods of your service.

**PHYSICAL/MENTAL REQUIREMENTS:** Applicants must be able to physically and mentally perform efficiently the duties of the position. Qualified applicants with disabilities who can perform the essential functions of the advertised position are encouraged to apply. The Hawaii Health Systems Corporation is committed to making reasonable accommodations on a case-by-case basis. Applicants seeking reasonable accommodation should be ready to discuss the accommodation sought so that a determination can be made that such accommodation is reasonable and would not cause the employer undue hardship.

**PHYSICAL EXAMINATION REQUIREMENT:** Offers of employment will be conditioned on the results of a complete physical examination, which includes a drug screening. For certain job categories, applicants may be referred to an HHSC-designated physician, rather than the applicant's personal physician of choice. The cost for all physical examinations, except the cost for the drug screening, shall be borne by the applicant and not the Hawaii Health Systems Corporation. The Hawaii Health Systems Corporation shall bear the cost of the drug screening.

**CRIMINAL/BACKGROUND, CREDENTIALING CHECKS:** Applicable checks will be conducted periodically and any associated costs may be borne by the applicant. If a job offer is made or employment is begun prior to completion of all applicable checks, any offer of employment or continued employment is contingent upon satisfactory return of all required checks.

**HOW TO APPLY:** Applications are available at the **Hawaii Health Systems Corporation (e.g.);** Human Resources Office, 3675 Kilauea Avenue, Honolulu, HI 96816. You can call (808) 733-8067, (Voice/TT), Toll Free (800) 845-6733, e-mail: [oahujobs@hhsc.org](mailto:oahujobs@hhsc.org) or visit our website at [www.hhsc.org](http://www.hhsc.org). Application hours are: 8:00am to 3:30pm at which time applicants are able to complete an application and have their application reviewed by the facility Human Resources Office. Only applicants that have been through a Human Resources (HR) applicant screening process will be considered for an interview with a hiring manager. Applications for announcements with a deadline date must be on file no later than the last day to file applications. Applications for announcements with "Continuous Recruitment Until Needs are Met" will be accepted as long as there are vacancies. Inactive/filled announcements will be taken off the HHSC website.

**STEPS TO AN ADMINISTRATIVE REVIEW, SUBSEQUENT APPEALS:** If you do not agree with a decision made by the Employment Office as to your non-qualification or non-selection for a position, you may complete a Request for Administrative Review form (available on the HHSC website) or you may submit a written request within twenty (20) days from the date of your sent notice to the Regional Chief Executive Officer/Designee. Your letter requesting the Administrative Review must include 1. The job title(s) and recruitment number(s), 2. the specific reason(s) you are requesting the review noting if there is a statute or rule violation, and 3. any additional information you want to submit to substantiate your request. **If you do not submit your request within the twenty (20) days deadline, no Administrative Review will be conducted.** Since the Administrative Review is a prerequisite to subsequent steps, failure to utilize this process will make you ineligible for subsequent appeals. The administrative review, formal complaint and/or appeals hearing will not necessarily postpone the recruitment process and/or rescind a selection.

If you do not agree with the Administrative Review, you may file a Formal Complaint and then, if you are still not satisfied, you can appeal to the HHSC Merit Appeals Board.

PERSONS WITH DISABILITIES MAY CONTACT THE EMPLOYMENT OFFICER, HAWAII HEALTH SYSTEMS CORPORATION AT (808) 733-7909 (TTD) TO DISCUSS SPECIAL NEEDS IN APPLYING.

Substitution of Education for General Clerical Experience:

1. Successful completion of a substantially full-time equivalent clerical curriculum of a duration of a year or longer, leading to a degree or diploma at an accredited community college, or at a business or technical school which included courses in basic English, arithmetic, general clerical procedures, and office machines will be deemed to have met the experience requirements for the Clerk III level.
2. Successful completion of a substantially full-time equivalent clerical curriculum leading to a degree, diploma, or a certificate of achievement at an accredited community college, business school or technical school which was for a period of less than one (1) year will be substituted for experience on a month-for-month basis provided the training included courses in basic English, arithmetic, general procedures, and office machines.
3. Partial Completion of Clerical Training:
  - a. Completion of half a school year of substantially full-time clerical curriculum at an accredited community college, or business and/or technical school which included courses in basic English, arithmetic, general clerical procedures, and office machines may be substituted for six (6) months of experience.
  - b. Completion of one (1) school year (a program of more than one year in length) of substantially full-time clerical curriculum at an accredited community college, or business and/or technical school which included courses in basic English, arithmetic, general clerical procedures, and office machines will be deemed to have met the requirements for the Clerk III level.
4. Education in an accredited university in a baccalaureate program with courses in English composition and college mathematics may be substituted for general clerical work experience on the basis of 15 semester hours for six (6) months of experience, up to a maximum of two (2) years.

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NAME: \_\_\_\_\_

**SUPPLEMENT TO THE APPLICATION FOR CLERICAL POSITIONS**

Indicate your typewriter preferences: Electric \_\_\_\_\_ Manual \_\_\_\_\_

*INSTRUCTIONS:* Under each category, please check off those courses which you completed and list any other courses that are pertinent to the position for which you are applying.

**High School**

Subject  
\_\_\_\_\_ English  
\_\_\_\_\_ Arithmetic or Math  
\_\_\_\_\_ Typing  
\_\_\_\_\_ Shorthand  
\_\_\_\_\_  
\_\_\_\_\_

**Business/Technical School or Community College**

<u>Subject</u>	<u>Credits</u>	<u>Degree or Certificate Received &amp; Major</u>
_____ English	_____	_____
_____ Math	_____	_____
_____ Typing	_____	_____
_____ Shorthand	_____	_____
_____ Office Procedures	_____	<u>Total Number of Credits Completed</u>
_____ General Office Procedures	_____	_____
_____ Office Machines	_____	_____
_____	_____	_____
_____	_____	_____

**University**

<u>Subject</u>	<u>Credits</u>	<u>Degree Received and Major</u>
_____ English	_____	_____
_____ Math	_____	_____
_____ Typing	_____	_____
_____ Shorthand	_____	<u>Total Number of Credits Completed</u>
_____	_____	_____
_____	_____	_____

**Others**

In this section, list any other training not covered above. List the school or program where the training was administered, the contents of the training and the length of the program.

SAMPLE:

<u>School of Program</u>	<u>Courses Covered</u>	<u>Length of Training</u>
MDTA	English, arithmetic, office practices Typing, telephone courtesy	total of 520 hours from 3/96 to 8/96

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I certify that all statements made on this supplemental form are true and complete to the best of my knowledge. I understand and agree that any misrepresentation or omission whenever discovered, is grounds for the denial of or immediate separation from employment.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_