

CAREER OPPORTUNITY
STATE OF HAWAII – DEPARTMENT OF TAXATION
Personnel Office - 830 Punchbowl Street - Room 217 Honolulu, Hawaii 96813

Opening Date: November 8, 2024

Closing Date: Continuous Recruitment

SPECIAL ENFORCEMENT SECTION (SES)
ASSISTANT INVESTIGATOR

Recruitment Number TAX-2024-20

Oahu District

Temporary, Full Time Exempt Position

(Continuation of position dependent on extension of program needs and availability of funds)

Salary: Negotiable based on experience

JOB SUMMARY:

Under the general supervision of the Special Enforcement Section Supervisor, the position assists with investigative activities in the detection of violation of laws, rules and regulations covered under Title 14, Taxation, specifically under Section 231, and under the jurisdiction of the Department of Taxation; assists investigators by providing support in gathering and organizing information and the preparation of written reports or spreadsheets, assists in conducting office examinations of tax returns to verify accuracy and completeness of information and performing other tasks required to support investigators in the performance of their duties and the achievement of the Special Enforcement Section's goals.

MINIMUM QUALIFICATION REQUIREMENTS:

KNOWLEDGE:

Knowledge of relevant Hawaii tax laws, rules, procedures, tax rates, exemptions, deductions, extensions, credits, assessments, delinquent taxes, business licensing, tax office operations such as filing and information recording systems, both manual and computerized as they apply to filing returns, tax search and collection methods and procedures, not required but highly desired, interviewing techniques.

SKILLS/ABILITIES:

Ability to think logically and analytically and to communicate effectively orally and in writing in the English language; ability to elicit information from individuals and judge the relevance of such information; ability to read, understand and explain materials such as tax rules, laws, memoranda, procedures, and penalties; ability to accurately compute tax liabilities, penalties, and interest; ability to use and operate calculating devices, computers and other digital devices; ability to use tact and sound judgement to deal effectively with taxpayers, co-workers, and others; ability to follow oral and written procedures and instructions; ability to understand the impact of actions taken and recommendations made regarding taxpayers; ability to plan, prioritize and organize work.

EXPERIENCE:

Two (2) years of progressively responsible experience which demonstrate numerical facility and logical, analytical thinking and involved reviewing documents to ensure that numerical data and arithmetic computations are complete, accurate, properly categorized and recorded, and in accordance with pertinent rules, policies, procedures and guideline. Experience in investigation, law, taxation, or accounting.

EDUCATION:

Graduating from an accredited four (4) year college or university or an associate degree in accounting.

REQUIRED LICENSES, CERTIFICATES

Hawaii driver's license.

HOW TO APPLY:

Submit to the address below: 1) Application, 2) Resume, 3) Transcripts (Copies of official transcripts are acceptable; however, original official transcripts will be required at the time of hire. On-line transcripts or academic record/grade summaries will NOT be accepted. Diplomas and copies will NOT be accepted), 4) a brief one-page statement outlining how you meet the minimum and desirable qualifications, and 5) three letters of recommendation (optional).

All requested documents/information become the property of the Department of Taxation. No electronic transmission will be accepted. Failure to submit all required documents shall deem an application to be incomplete and will not be considered.

Send required documents to:

Mail:

Department of Taxation
Human Resources Office
P.O. Box 259
Honolulu, HI 96809

In-Person:

Department of Taxation
Human Resources Office
830 Punchbowl St., Room 217
Honolulu, HI 96813

NOTIFICATION TO APPLICANTS:

The Department of Taxation will use electronic mail (email) to notify applicants of important information relating to the status and processing of their applications as part of our ongoing efforts to increase operational efficiency, promote the conservation of green resources, and minimize delays and costs.

Please ensure that the email address and contact information you provide is current, secure, and readily accessible to you. We will not be responsible in any way if you do not receive our emails or fail to check your email-box in a timely manner.

QUALITY OF EXPERIENCE:

Possession of the required number of years of experience will not in itself be accepted as proof of qualification for a position. The applicant's overall experience must have been of such scope and level of responsibility as to conclusively demonstrate that he/she has the ability to perform the duties of the position for which he/she is being considered.

AN EQUAL OPPORTUNITY EMPLOYER

If you need a reasonable accommodation to participate in the application process, please call the Personnel Office at 587-1503 (voice), 587-1417 (TTY). A request for reasonable accommodation should be made no later than ten calendar days prior to the needed accommodations.

STATE OF HAWAI'I APPLICATION FOR NON-CIVIL SERVICE APPOINTMENT

The information on pages 1 and 2 will not be released to persons involved in the appointment process.

Information requested in items 10 through 19 is needed to make determinations on your suitability for employment. Dismissals from employment or dishonorable separations from military service do not automatically disqualify you from employment. The circumstances of each individual case will be evaluated against the requirements of the position for which you have applied, to determine suitability for employment.

10. DISMISSALS FROM EMPLOYMENT AND/OR DISHONORABLE SEPARATIONS FROM MILITARY SERVICE

Within the past five years, were you:

A) Fired, terminated for cause, dismissed, discharged or asked to resign from employment?..... YES..... NO

B) Separated from military service under conditions other than honorable? YES..... NO

(If you answer "Yes" to question 10A or 10B, please explain in detail in item #11 below, the dates and reasons for your dismissal from employment or separation from military service. For dismissals from employment, provide also the name and address of the employer.)

11. _____

12. WITHIN THE PAST THREE (3) YEARS, HAVE YOU BEEN CONVICTED OF ANY OFFENSE RELATED TO CONTROLLED SUBSTANCES? YES..... NO

(If you answer "Yes" to the above question, please explain in detail in item #13 below, the dates, nature and circumstances of the conviction; the sentence imposed and its current status; and any other relevant information you wish to provide.)

13. _____

14. HAVE YOU EVER BEEN CONVICTED OF ANY ACT, ATTEMPT OR CONSPIRACY TO OVERTHROW THE STATE OR FEDERAL GOVERNMENT BY FORCE OR VIOLENCE? YES..... NO

(If you answer "Yes" to the above question, please explain in detail in item #15 below, the dates, nature and circumstances of the conviction; the sentence imposed and its current status; and any other relevant information you wish to provide.)

15. _____

16. SUSPENSION OR REVOCATION OF LICENSE Was your license or certification to practice in a regulated profession (for example, physician, engineer, nurse, plumber, etc.) ever suspended or revoked? YES..... NO

(If you answer "Yes," please explain in detail in item #17 below, the type of license; the date; the state; the specific board or organization that suspended or revoked your license; the circumstances of the suspension or revocation; and any other relevant information you wish to provide.)

17. _____

18. SETTLEMENTS OR AGREEMENTS Have you accepted a settlement, a cash buyout such as through the State's Separation Incentive Program or are you subject to any restriction limiting or precluding you from seeking or securing employment with the State of Hawai'i? YES..... NO

(If you answer "Yes," to question 18, please explain in detail in item #19 below, the reason and date of your settlement or restriction from applying with the State of Hawai'i.)

19. _____

STATE OF HAWAI'I DEPARTMENT OF TAXATION
EDUCATION AND EMPLOYMENT HISTORY
STATE OF HAWAI'I APPLICATION FOR NON-CIVIL SERVICE APPOINTMENT

FOR OFFICIAL USE ONLY

DEPARTMENTAL PERSONNEL
STAFF TO SELECT CATEGORY

- Exempt TAOL
 89 Day _____

1. POSITION TITLE APPLYING FOR: _____
2. RECRUITMENT NUMBER or POSITION NUMBER: _____

As required by federal and/or state laws, we do not discriminate on the basis of age, sex (including gender identity or expression), religion, race, color, ancestry, national origin, disability, marital status, veteran's status, sexual orientation, arrest and court record, citizenship, genetic information or any other protected characteristic. The State of Hawai'i is an equal opportunity employer and complies with applicable state and federal laws relating to employment practices.

3. NAME: _____
Last First Middle
4. OTHER NAMES USED OR FORMER
LAST NAME: _____
5. E-MAIL ADDRESS: _____
6. MAILING ADDRESS: _____
P.O. Box or Number and Street
City State Zip Code
7. PHONE NO.: _____
Home Other

8. EDUCATION HISTORY: When verification is required, the documentation must be submitted at the time of the application. If not, you may not receive credit for the training and/or your application may be considered incomplete and rejected. The information you provide in this section will be used strictly in the evaluation of your qualifications for the position(s) for which you are applying. The information you submit on this form may be verified.

DO NOT
WRITE
IN THIS
SPACE

A. NAME AND LOCATION (city and state) of last grade school attended: (elementary, intermediate or high school)
(School name/type) (City/State/Country)
Did you graduate? Yes No If no, what grade level did you complete? _____
Did you receive a GED? Yes No

B. TRAINING: In-service training, business, trade, armed forces, college or university, graduate of professional schools.

NAME & ADDRESS	Course or Major Field of Study	Number of Credits or Hours Completed		Kind of Degree, Diploma or Certificate Received
		Semester	Quarter	

9. LICENSES, CERTIFICATES, OTHER QUALIFICATIONS

A. DRIVER'S LICENSE: Yes, I have a valid driver's license or I am able to obtain a valid driver's license by the time of appointment.
 No, I do not have a driver's license and/or I am not interested in being considered for positions which require a driver's license.
B. OTHER LICENSES OR CERTIFICATES: Please indicate the kind, registration number, and the State or other licensing authority. *If proof of evidence is required, please submit a photocopy or present for verification.*

C. KNOWLEDGE OF LANGUAGE OTHER THAN ENGLISH: List the language and check the appropriate block(s). Some positions require the ability to speak, read, and/or write in a language other than English.

LANGUAGE	SPEAK	READ	WRITE

D. SPECIAL QUALIFICATIONS: Include membership in professional or scientific societies, honors, awards, fellowships, publications (list but do not submit unless requested), etc.

EDUCATION AND EMPLOYMENT HISTORY

STATE OF HAWAII APPLICATION FOR NON-CIVIL SERVICE APPOINTMENT

10. EXPERIENCE: Please type or print legibly in ink. Begin with your present or last employment/training and work backwards. Describe all employment/training, including military service and volunteer work. Use separate blocks if your duties and responsibilities changed while working for the same employer. To receive full credit for your experience, describe in detail the tasks you were assigned. If you supervised others, explain your duties as a supervisor and indicate the number and job duties of employees you supervised. If more space is needed provide the information on a blank sheet titled "Experience" and attach it to this form. Information you submit on this form may be verified.

Do not submit a resume in place of completing this page.

Your Present or Last	Employer _____ _____ _____	From: _____ Month Year
	Company URL Internet Address _____	To: _____ Month Year
	Your Position Title and Duties _____ _____ _____	<input type="checkbox"/> Full Time <input type="checkbox"/> PartTime <input type="checkbox"/> Volunteer
	Do you supervise? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, how many employees?</i> _____	Average hours worked per week _____ Reason(s) for leaving _____ _____ _____ _____ May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer _____ Address _____	From: _____ Month Year	
Supervisor's Name and Title _____	To: _____ Month Year	
Company Phone Number _____	<input type="checkbox"/> Full Time <input type="checkbox"/> PartTime <input type="checkbox"/> Volunteer	
Company URL Internet Address _____	Average hours worked per week _____	
Your Position Title and Duties _____ _____ _____	Reason(s) for leaving _____ _____ _____ _____ _____ May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Did you supervise? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, how many employees?</i> _____		
Employer _____ Address _____	From: _____ Month Year	
Supervisor's Name and Title _____	To: _____ Month Year	
Company Phone Number _____	<input type="checkbox"/> Full Time <input type="checkbox"/> PartTime <input type="checkbox"/> Volunteer	
Company URL Internet Address _____	Average hours worked per week _____	
Your Position Title and Duties _____ _____ _____	Reason(s) for leaving _____ _____ _____ _____ _____ May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Did you supervise? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, how many employees?</i> _____		
Employer _____ Address _____	From: _____ Month Year	
Supervisor's Name and Title _____	To: _____ Month Year	
Company Phone Number _____	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer	
Company URL Internet Address _____	Average hours worked per week _____	
Your Position Title and Duties _____ _____ _____	Reason(s) for leaving _____ _____ _____ _____ _____ May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Did you supervise? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, how many employees?</i> _____		