

Gloucester County Job Description

POSITION:	Video Technician – WAR
DEPARTMENT:	Information Technology
JOB CODE:	A466
FLSA:	Non-Exempt

GENERAL STATEMENT OF JOB: Performs technical work in the operation of audio/video equipment and televising media programs for the county government cable communications. Work involves videotaping and broadcasting live cablecasts of board meetings, hearings, and other meetings/events of public interest on the local government access channel for play on government and school access channels.

ESSENTIAL JOB FUNCTIONS:

Prepares, sets up and operates audio/video technical equipment and cameras for county cable communications.

Videotapes and broadcasts live cablecasts of regular and special meetings of the Gloucester Board of Supervisors, Gloucester School Board and other governmental meetings or hearings as directed.

May assist in the maintenance of audio/video technical equipment and cameras for county cable communications including general maintenance, trouble shoots, repairs and tests equipment to support the videotaping and broadcasting of meetings.

Performs other related work as required.

JOB LOCATION AND CONDITIONS:

Work is typically performed indoors with minimal exposure to hazardous chemicals or fumes.

REQUIRED KNOWLEDGE, SKILLS AND ABILITIES:

General knowledge and understanding of the use, design, and operation of broadcast television, cable television, related technical television test equipment, and its integration with computer hardware and software.

Broad knowledge of computers, presentation software and audio-video equipment.

General knowledge of audio acoustics, feedback, equalization, reverberation, microphones, and sound system design.

General knowledge of audio-video equipment and its general design and operation.

General knowledge of County, School, and Federal Communications Commission (FCC) policies and procedures.

General knowledge of troubleshooting techniques on the component, circuit, and system level.

Ability to analyze and to resolve problems in voice, data and video transmission systems.

Ability to use current office automation applications software.

Ability to read, write and apply technical reference data; ability to prepare technical documentation and reports leading to appropriate course of action.

Ability to exercise independent judgment, discretion and confidentiality in the completion of work assignments and in relationships with other employees.

Ability to deal with people beyond giving and receiving instructions; perform under minimal levels of stress.

Ability to comprehend or understand instructions and underlying principles; to reason and make judgments; to understand and follow oral and written instructions; to make decisions in accordance with established procedures and policies; to guide and/or give instructions.

Ability to comprehend language, to understand relationships between words, and to understand meanings of whole sentences and paragraphs. To present information or ideas clearly. Ability to speak/talk, hear/listen and read.

EDUCATION AND EXPERIENCE:

Associate's Degree in communications, video production, or related field.

One (1) to three (3) years relevant work experience in video/cable production, public information or communications.

Any equivalent combination of education and experience which provides the required knowledge, skills and abilities.

Successful candidates will begin as a trainee until they are fully trained and able to work independently.

PHYSICAL REQUIREMENTS:

C = Continuous – over 6 hours a day	O = Occasional – less than 3 hours a day	P = Periodic – several times a year
F = Frequent – between 3 and 6 hours a day	I = Intermittent–several times a week/month	N/A = Not applicable to position

LIFT/CARRY	C	F	O	I	P	N/A
1 to 10 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 to 20 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21 to 50 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
51 to 75 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
76 to 100 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

PUSH/PULL	C	F	O	I	P	N/A
1 to 10 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 to 20 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21 to 50 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
51 to 75 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
76 to 100 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

MOVEMENT	C	F	O	I	P	N/A
Carrying	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bend/Stoop/Twist	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kneel/Crawl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reach Above Shoulders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reach Below Shoulders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grasp/Squeeze	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climb Stairs/Ladder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Uneven Walking Surface	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Even Walking Surface	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ENDURANCE	C	F	O	I	P	N/A
Stationary Position (stand or sit)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Move, Traverse (walk)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Operate, Activate, Use, Prepare, Inspect, Place, Detect, Position (use of hands/fingers)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EQUIPMENT USAGE & OPERATION	C	F	O	I	P	N/A
Standard Office Equip.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motor Vehicle	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle requiring CDL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other (explain)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

WORK WITH/NEAR	C	F	O	I	P	N/A
Machinery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Electricity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Power Tools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Chemicals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fumes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Heights	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

ENVIRONMENT	C	F	O	I	P	N/A
Indoors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outdoors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extreme Heat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Extreme Cold	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Dusty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Excessive Noise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other (explain)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

VISION REQUIREMENTS (Check all that apply)	
Depth Perception	<input checked="" type="checkbox"/>
Color Vision	<input checked="" type="checkbox"/>
Peripheral Vision	<input checked="" type="checkbox"/>
Uncorrected/Corrected vision 20/40 or better in one or both eyes; 100 degrees, or better, horizontal vision in one or both eyes	<input checked="" type="checkbox"/>