Legislative Building Service Security Officer

Salary: \$41,396 - \$46,121 BOE

Reports to: Security Supervisor, Building Superintendent and Assistant Building Superintendent

INTRODUCTION

Legislative Building Services is responsible for the legislative campus grounds and buildings. LBS ensures that the grounds are maintained and continually operating to the best of standards. They are the main point of contact for all custodial, security and building operations on the legislative campus. The LBS is nonpartisan, and much of the agency's work is confidential. The primary job of each LBS employee is to help the agency meet the expectations of the people it serves and to maintain and enhance the integrity and effectiveness of the legislature and the legislative process.

SUPERVISION AND GUIDELINES

Work is under general supervision. Guidelines include agency policies and state laws.

EXAMPLES OF WORK PERFORMED

- Patrols and monitors an assigned area to safeguard against theft, vandalism and potential threats to building staff and the public.
- When directed to, reports suspicious activities to local authorities.
- Monitors surveillance cameras, inspects property, and monitors crowds.
- Contacts law enforcement or fire department in case of an emergency.
- After business hours, checks doors, windows, and gates to ensure the property is secure.
- Investigates reports of suspicious activity on the property.
- Reasonably detains persons suspected of criminal activity until law enforcement arrives.
- Escorts discharged staff, trespassers, and other unwelcome parties off the premises.
- Performs other related duties as assigned.

DISTINGUISHING CHARACTERISTICS

- Incumbent must be able to work well under pressure.
- Must always be courteous and professional.
- Must have good interpersonal skills to be able to get along effortlessly with other members of the security team, customers and staff.
- Excellent observational skills and attention to detail.
- Authoritative verbal communication skills.
- Ability to remain calm in high-pressure situations.
- Ability to learn the layout of the property and buildings.

MINIMUM QUALIFICATIONS

High school diploma or equivalent plus two years of experience in security, military, law enforcement or (60) sixty hours from an accredited college.

WORKING CONDITIONS

Employees work in a professional office setting in the State Capitol. During legislative sessions, the agency is open seven days a week, long hours are the norm and staff may be on-call depending on session demands.

Legislative employees are exempt from the State Personnel Act and from the federal Fair Labor Standards Act.

PHYSICAL REQUIREMENTS

- Ability to patrol the inside of the buildings and grounds quickly.
- Physically able to capture and detain individuals if necessary.
- Frequently moves equipment or supplies weighing up to fifty pounds across campus for various needs.
- Move about the inside of the buildings and grounds.
- Constantly position self to complete assigned tasks.
- Must be able to remain in a stationary position 50% of the time.
- Occasionally climb up and down ladders.

SALARY RANGE

\$41,396 - \$46,121

<u>Please send your application or resume to Ashley Archuleta at Ashley.archuleta@nmlegis.gov.</u>

DEPARTMENT OF PUBLIC SAFETY / P.O. BOX 1628 / SANTA FE, NM 87504-1628 ATTN: RECORDS \$15.00 PER RECORD CHECK

AUTHORIZATION FOR RELEASE OF INFORMATION

I,NAME (MUST BE PRINTED-LEGI	(BLY)	(SSN#)		(DOB)	
Alias' Name:	_ SSN:	D	OB:		
Name:					
Legislative Building Services		Accour	nt: 2200		
NAME OF AGENCY OR PERSON RE	CEIVING	ARREST RECU	M)		
ADDRESS: 490 Old Santa Fe Trail,	Suite 211,	Santa Fe, New	Mexico 8	7501	
AS AN AUTHORIZED AGENT FOR OBTAINING COPIES OF) ANY NEW ARREST RECORD INFORMATION MAINCLUDING INFORMATION CONCINFORMATION OBTAINED FROM RE	V MEXICO AINTAINEI ERNING F	ARREST FING DBY THE DEPAI ELONY OR MIS	ERPRINT (RTMENT O SDEMEANC	CARD SUPPORTED F PUBLIC SAFETY, OR ARRESTS AND	
TO THE CUSTODIAN OF THE RECORDS IN QUESTION, I HEREBY DIRECT YOU TO RELEASE SUCH INFORMATION TO THE AUTHORIZED AGENT AS DESCRIBED ABOVE.					
I HEREBY RELEASE THE CUSTOD DEPARTMENT OF PUBLIC SAFETY, REPRESENTATIVES IN ANY CAPAC DAMAGE OF WHATEVER KIND OR MY HEIRS, ASSIGNS, ASSOCIATES, OF ANY NATURE BECAUSE OF COMTHIS "AUTHORIZATION FOR RELEASE OR RELEASE IS BINDING, NOW AND IN 120 DAYS FROM THE DATE SIGNER REPRESENTATIVE OR REPRESENTATIVE	INCLUDINCITY, FROM NATURE, V PERSONAMPLIANCE ASE OF INF BECAUSE N THE FUT ED, ON MY	MG ANY OF THE M ANY AND AL WHICH AT ANY ' L REPRESENTA BY SAID CUSTO FORMATION" AN OF ANY USE FURE AND IS VA Y HEIRS, ASSIG	IR AGENTS L CLAIMS TIME COUI TIVE OR F DIAN OR C ID MY REC OF THES LID FOR A	S, EMPLOYEES, OR OF LIABILITY OR LD RESULT TO ME, REPRESENTATIVES CUSTODIANS WITH QUEST CONTAINED E RECORDS. THIS PERIOD OF UP TO	
APPLICANT SIGNATURE:					
		DATE:			
SIGNED AND SWORN TO B	EFORE ME	ON THIS	Day Of	20	
State of County of		_ For Departm	ent of Publi	ic Safety Use Only	
(SEAL)					
(SIGNATURE OF NOTAR	Y PUBLIC)				
MY COMMISSION EXPIRES:					

Legislative Council Service 411 State Capitol Santa Fe, New Mexico 87501 (505) 986-4670 (505) 986-4280 fax Veronica.Grace@nmlegis.gov

NEW MEXICO STATE SENATE APPLICATION FOR EMPLOYMENT

THIS ENTIRE FORM MUST BE PRINTED IN INK OR TYPED - (APPLICATION INFORMATION)						
Social Security Number: (last four digits)	Position Applied For:					
Name: First	M.I.	Last				
Mailing Address:	City:	State: Zip Code:				
Residence Phone:	Business Phone	Cell Phone: E-mail Address:				
Senator/Legislative District:	County:	Date of Birth				
	<u> </u>		SKILLS			
TYPINGV	VPM	·		SHORT H	IAND	WPM
COMPUTER SKILLS/SOFTWARE - (List)						
KNOWLEDGE OF WORDPERFECT: No () Yes () Version:						
KNOWLEDGE OF WINDOWS: No () Yes () Version:						
EXPERIENCE IN PROOF READING						
EDUCATION AND FORMAL TRAINING Colleges, Military, Trades, Business or other schools attended after High School						
Name Inscrincia, Phone No.	Magair Com	ise of Study	Tio(sal #-(Redins	Typeoff Confice	Districción re Essimació
1010						
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WORK EXPERIENCE Attached resumé in lieu of the				
Start with your present or last job. Include any job-related military servorganizations which indicate race, color, religion, gender, national original				
Employer:	Dates Employed Work Performed From To			
Address:				
Telephone Number (s):	Hourly Rate/Salary Starting Final			
Starting/Present Job Title:				
Supervisor:				
Reason for Leaving:	May we contact? Yes No			
Employer:	Dates Employed Work Performed From To			
Address:				
Telephone Number (s):	Hourly Rate/Salary Starting Final			
Starting/Present Job Title:				
Supervisor:				
Reason for Leaving:	May we contact? Yes No			
Employer:	Dates Employed Work Performed From To			
Address:				
Telephone Number (s):	Hourly Rate/Salary Starting Final			
Starting/Present Job Title:				
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Reason for Leaving:	May we contact? Yes No			
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Address:				
Telephone Number (s):	Hourly Rate/Salary Starting Final			
Starting/Present Job Title:				
Supervisor:				
Reason for Leaving:	May we contact? Yes No			
COMMENTS. INCLUDE EXPLANATION OF ANY GAPS IN EMP	LOYMENT.			
ADDITIONAL INFORMATION				
Other qualifications: Summarize special job related skills and qualifications acquired from employment or other experience.				

PE	RSONAL REFERENCES			
Name		Address/Telephone Number(s)		
LEGISLAT	TIVE EMPLOYMENT HISTOR	Y		
Year	Position	Supervisor		
New Mexico				
Other				
This information is no	ot confidential, except as otherwise provid	nea by law		
I understand that employment with the New Mexico Sta	ate Senate can be terminated at any time.			
I understand that consideration for employment is conti Mexico State Senate to investigate the truthfulness of all listed references, or any other persons who can verify in	Il statements made on this application and	background check I authorize the New to contact my former employers, other		
I understand that I may be required to verify education	and employment history.			
I further authorize the Chief Clerk of the Senate to discr	uss the results of any investigation with St	ate Senators.		
I further authorize all contacted persons and former emportant suitability for employment, and I release each person are	ployers to provide information concerning nd former employer from liability for prov	this application, my background and iding such information.		
I certify that the information contained in this application omissions in any detail is grounds for disqualification f	on is correct, to the best of my knowledge, from consideration for employment or if hi	and understand that falsifications and/or red, for dismissal from employment.		
Unsigned applications will not be considered.				
Signature of Applicant		Date		
Organist of represent				
The Federal Immigration Reform and Control Act requito work in the United States. This proof must be probusiness days after date of hire.	tires individuals to provide to an employer ovided to, and verified by, state agencies	r documented proof that they are authorize s at the time of hire or no later than thre		