

## **Administrative Supervisor**

The administrative supervisor is responsible for the overall administrative functions for Jackson Municipal Airport Authority and oversees the support of JMAA's leadership team. In conjunction with providing administrative support, the incumbent will supervise other administrative staff, offering guidance and training while delegating work. The job is to ensure that day-to-day operations of the organization run smoothly.

Administrative Supervisor Duties and Responsibilities

## **Hire Administrative Staff**

The Administrative Supervisor participates in the hiring process of administrative staff. They notify Human Resources when additional staff members are needed and participates in the interviewing process.

#### **Train Administrative Staff**

The supervisor will provide guidance and coaching, training to all new incoming staff as well as provides any necessary additional training to current staff.

### **Manage Administrative Staff**

As the direct supervisor for administrative and support staff, the Administrative Supervisor is responsible for assigning job duties to individual staff members and prioritizing workloads. They ensure that tasks are completed in an effective and timely manner.

### **Evaluate Administrative Staff Performance**

In order to ensure their team's ongoing success, the Administrative Supervisor must continually evaluate their staff members and provide feedback for improvement. They are also responsible for identifying areas of weakness, departmental inefficiencies and providing appropriate recommendations for resolving these issues. They ensure employees act in accordance with JMAA policies and implement disciplinary action when necessary.

### Perform Administrative Tasks

The administrative supervisor will also assist with administrative tasks as needed. This can include managing calendars, responding to email and phone messages, assisting with customer requests and questions, coordinating meetings, compiling meeting materials and documents, creating presentations, booking travel and providing executive staff with support as needed.

#### **Administrative Supervisor Skills**

The administrative supervisor is a organized multi-taskers and excellent communicator with strong decision making abilities. They play an important management role, and in order to be successful they must be capable of prioritizing duties and exhibiting leadership skills, which includes a capacity for educating employees as well as an ability to be an assertive supervisor.

Core skills: If you want to work as an Administrative Supervisor, focus on the following.

- Supervisory Experience
- Proficiency in Microsoft Office programs, such as Word, PowerPoint and Excel
- Demonstrating ability to multitask, create spreadsheets, presentations, etc.

Please submit a completed copy of the following employment application to:

Jackson Municipal Airport Authority Human Resources Department Post Office Box 98109 Jackson, MS 39298-8109 Fax: (601) 664-3514

Email: recruiter@jmaa.com Acceptance deadline is March 22, 2019 EOE

# \*\*WE ARE AN EQUAL OPPORTUNITY EMPLOYER\*\* EOE, M/F, D/V

## APPLICANT DATA RECORD

All applicants are considered for the applied position without regard to race, color, religion, sex, national origin, age, marital status, veteran status, disability (if performance ability coincides with job requirements), or any other legally protected status.

Solely to help us comply with government record keeping, reporting and other legal requirements, we ask that you complete this Applicant Data Record. We appreciate your cooperation. The completion of this Data Record is optional. If you choose to volunteer the requested information, please note that all Data Records are kept in a Confidential File and are not a part of your Application for Employment or your personnel file. Periodic Reports are made to the government on the following information.

YOUR COOPERATION IS VOLUNTARY. INCLUSION OR EXCLUSION OF ANY DATA WILL NOT AFFECT ANY EMPLOYMENT DECISION.

Position Applied For: Administrative Supervisor			Today's Date:					
Name								
(Last)	(First)		(MI)	Socia	I Security	Number:		
Address:				Telep	hone Nur	mber:		
City	State	Zip		Date	of Birth			
Check One:			Male				☐ Female	
Check one of the	following:	(Ethnic Origin)						
White		☐ Hispani	ic			American Indi	an/Alaskan Native	
African Ame	erican	☐ Asian/Pa	cific Island	der		☐ Other	,	_
Marital Status:			Married				Single	
Referral Source:	Co	llege/Tech School		News	spaper		Employment Agency	
Walk-In	Friend/Relative			Other-S	Specify			



# 100 INTERNATIONAL DRIVE SUITE 300 JACKSON, MISSISSIPPI 39208

## Application For Employment

(Please Print or Type in Black Ink)

### WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Applicants are considered for all positions without regard to race, religion, gender, national origin, age, veteran status, the presence of a non-job related physical or mental condition, handicap, or disability, or any other legally protected status. If you require accommodation or assistance in completing this application or in any stage of the employment process, please let us know.

APPLICATION FOR: Administrative Supervisor

ADVERTISEMENT PERIOD: 03/12/2019-03/22/2019

	PE	RSONAL					
NAME							
(Last)	(First)		(Middle Initial)				
ADDRESS							
(Street Address)	(City)		(State)	(Zip)			
HOME PHONE NO. ()	ALTERN	ATE PHONE NO	. ()				
SOCIAL SECURITY #	OCIAL SECURITY #EMAIL						
DRIVER LICENSE#	Class	Expiration	State				
When will you be available to begin	if selected for the posi-	tion?					
Are you available to work shifts?			Yes	No			
Are you authorized to work in the U	Yes	No					
(Proof of citizenship or immigration status wil	l be required upon employme	ent)					
Have you ever been employed with	Yes	No					
lf yes, give dates							
Have you ever been convicted of a	crime other than minor	traffic violations?	Yes	No			
f yes, state nature of offense, when	, where and disposition	1					
(A conviction will not necessarily disqualify a	an applicant from employmen	nt)					
Do you have any relatives presently	employed by the Jacks	son Municipal Airp	ort Authority?	Yes1			
f yes, list names and relationship_	_			_			

Employment with the Jackson Municipal Airport Authority is contingent upon the ability to be granted and maintain ID/secure media badge as regulated by TSA, and a valid drivers license and motor vehicle report in compliance with JMAA's Drivers Policy. A comprehensive pre-employment background check includes an education/experience investigation, a medical physical exam, a drug/alcohol screen, a motor vehicle report and a fingerprint-based criminal history record check.

Education & Training													
	High School			College/Technical/Business				Graduate School					
School Name & Location													
Years Completed						_		_	١.	_			_
(Circle)	9	10	11	12	1	2	3	4	1	2	3	4	5
Diploma/Degree (Verification of education required)													
Describe Course of Study:													
Describe Specialized Training, A	Apprent	iceships	, Skills, Ex	tra-Curri	cular Ad	ctivities, Fo	oreign Lanç	guages:					
Employment Experience													
Start with your present or last	job. If	unempl	oyed, staı	t with yo	our imm	nediate pa	ast employ	ment. Be	speci	fic and	comp	olete. In	clude
military service assignments a	-	-	=	-		=			-		-		
application. Exclude organizat	ional n	ames th	at indicat	e race, c	color, re	eligion, ge	nder, natio	onal origin	n, disa	bilities	or oth	ner prot	ected
status. Explain any gaps be	tween	employ	ments. F	ailure to	expla	in any g	aps in er	nploymen	nt will	be ju	stifica	tion for	your
disqualification from the selection	on proc	ess. Us	e addition	al sheets	if nece	ssary.							
Your Job Title					_	Telephon	e No. (	)					
Company Name			_	Employed	d (Indicate	Month, D	ay and	d Year)	)				
						_			_				
Address					-	From			_ To	· ——			
-					-	Annual S	olon/						
Name of Supervisor							alal y		Loc	.+			
Name of Supervisor					_	Start			Las	··			
Describe Your Duties					Reason for Leaving								
					_		ooag						
					_								
					_	May We	e Contact	This Emp	oloyer?	Yes	1	No 🗆	]
					_	If No, P	lease Expla	ain					
		Б	<del>.</del> .										
Full Time		Part-	lime										

SOCIAL SECURITY NO.:

NAME:

NAME:	SOCIAL SECURITY NO.:
Your Job Title	Telephone No. ()
Company Name	Employed (Indicate Month, Day and Year)
Address_	From To
	 Annual Salary
Name of Supervisor	
Describe Your Duties	Reason for Leaving
	May We Contact This Employer? Yes  No
	If No, Please Explain
Full Time Part-Time	e
Your Job Title	
Company Name	Employed (Indicate Month, Day and Year)
Address	From To
-	 Annual Salary
Name of Supervisor_	·
Describe Your Duties	Reason for Leaving
	May We Contact This Employer? Yes  No
	If No, Please Explain
Full Time Part-Tir	me
Your Job Title	Telephone No. ()

Company Name	Employed (Indicate Month, Day and Year)
Address	From To
Name of Supervisor	Annual Salary
Describe Your Duties	
	May Wa Cantact This Employer? Ves No
	If No, Please Explain
Full Time Part-Time	
Additional Skills	
State any additional information you feel may be helpful t	o us in considering your application.
Indicate any professional licenses or certificates, license r	numbers, their expiration dates and issuing agency.

## **Professional References:**

List the name, title, contact information, and relationship of at least three references who are not related to you.

Name	Name Title		Relationship		

## Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowle	dge.
I understand that an investigation of all statements contained in this application include at a minimum: personal and business references; employment historial military service. If a conditional offer of employment is extended, I understand to successful completion of job-related testing, a medical examination, an alcohological examination, and a motor vehicle report. I understand that for psychological examination is also required. I agree, upon request, to sign all reforms.	bry; education/technical training; and that my hiring may be contingent upon ohol and drug screening, a criminal Certified Police Officer positions, a
Signature of Applicant Date	

THIS APPLICATION FORM MUST BE COMPLETED IN FULL, SIGNED AND DATED.



## Jackson Municipal Airport Authority

Human Resources Department
Post Office Box 98109
Jackson, MS 39298-8109
Fax: (601) 664-3514

## Authorization to Release Employment Information

attendance, performance report release of this information. This	s, and disciplinary records release is executed with	ority to obtain information pertaining to my employment, ds from previous or current employers. I hereby authorize in full knowledge and understanding that the information is Authority only as may be necessary in arriving at an
•		rom any and all liability for damages of any kind because release the information requested.
Please print all information legib	, ,	
Full Name		Social Security Number
Current Address		
Telephone Number(s)	(Day)	(Evening)
Signature of Applicant		 Date