

Jackson Municipal Airport Authority's mission is to connect Jackson to the world, and the world to Jackson. If you'd like to see your career take flight and help us deliver on this mission, apply with us today! If you land a position with JMAA, there are abundant benefits you may be eligible for including medical, dental, vision, life and disability insurances, generous time off benefits, a rich retirement program and more! JMAA encourages the development of its team members and has an education reimbursement program too. If you have the skills to successfully fill one of our open positions, we would love to speak with you!

JMAA is currently looking for qualified candidates to fill the role of Maintenance Technician.

What traits do we seek? Successful candidates will...

- Have knowledge of methods, practices, and equipment used in building maintenance services for large facilities.
- Know techniques in carpentry, plumbing, painting, mechanical and electrical work.
- Excel at the use and maintenance of tools and equipment used in maintenance, reconstruction, and repair work.
- Shine at performing tasks safely and compliantly, communicating clearly, and building cooperative working relationships.
- 2+ years in a maintenance trade and/or completion of a formal apprenticeship program in a building trade.
- Be able to pass and maintain background and security clearance.
- Have a valid Mississippi driver's license.

What Do You Get to Do? You will...

- Maintain and repair airport facilities, equipment and buildings by performing skilled carpentry, electrical, welding, painting, plastering, plumbing, mechanical maintenance and pavement striping.
- Install, maintain, repair and perform PM inspections on various equipment including heating, ventilation and air conditioning equipment, electrical systems, bag belt systems, and more
- Install, maintain and repair sewer and drainage systems and plumbing fixtures
- Participate in all phase of construction and remodeling activities

If you are up for this amazing career opportunity where the sky is the limit, send your resume to <u>recruiter@jmaa.com</u> and be sure to include "Maintenance Technician" in the subject line. We welcome you to learn more about us at <u>jmaa.com</u>.

This job posting is a summary of the primary duties and responsibilities of the position. It is not intended to be a comprehensive listing of all duties and responsibilities. A detailed job description will be provided during the interview.

We're an equal opportunity employer. All applicants will be considered for employment without attention to race, color, religion, sex (including pregnancy, gender identity, and sexual orientation), national origin, age (40 or older), disability, genetic information, and any other protected status.

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.

Last Name			First Name N			
Check one:	Sex:	Male	Female			
Check one:	Marital Status	Married	Single			
Check one of the White Hispanic	African	American acific Islander	American Indian/Alaskan Native Other Specify:			
How did you ho Walk-In Newspaper		e of the following: nent Agency 'Tech School	Friend/Relative Other 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: **Maintenance Technician** ADVERTISEMENT PERIOD: 04/07/2021-04/21/2021

Personal:				
	Last Name	First Name	MI	
Address				
	City	State	Zip	
Social Security #				
Home Phone #	()	Alternate Phone # ()		
L	Driver License #	Class Expiration	State	
Are you available to Are you authorized (Proof of citizenship	vailable to begin if selected for the position work shifts? to work in the U.S. on an unrestricted basi or immigration status will be required upon employed with JMAA before?	is?	Yes No Yes No Yes No	
Have you ever been convicted of a crime other than minor traffic violations? Yes N If yes, state nature of offense, when, where and disposition				
(A conviction will not necessarily disqualify an applicant from employment) Do you have any relatives presently employed by the Jackson Municipal Airport Authority? Yes No If yes, list names and relationship				
media badge as regu Policy. A comprehe	ulated by TSA, and a valid driver's license a nsive pre-employment background check	contingent upon the ability to be granted and and motor vehicle report in compliance with includes an education/experience investigat and a fingerprint-based criminal history reco	JMAA's Drivers ion, a medical	

Education & Training													
		High School			Colle	ge/Tech	nical/Bu	siness		Graduate School			
School Name & Location													
Years Completed (circle)	9	10	11	12	1	2	3	4	1	2	3	4	5
Diploma/Degree (Verificat	Diploma/Degree (Verification of education required												
Describe Course of Study:													
Describe Specialized Train	ing, App	rentices	hips, Ex	tra-Curri	cular Acti	ivities, Fo	oreign Lai	nguages:					

Employment Experience

Start with your present or last job. If unemployed, start with your immediate past employment. Be specific and complete. Include military service assignments and volunteer activities. Any military service must be documented by providing a DD214 along with this application. Exclude organizational names that indicate race, color, religion, gender, national origin, disabilities or other protected status. Explain any gaps between employments. Failure to explain any gaps in employment will be justification for your disqualification from the selection process. Use additional sheets if necessary.

Your Job Title	Telephone Number ()
Company Name	Employed Dates (Indicate Month, Day and Year)
Address	From: To:
City, State, Zip Name of Supervisor Describe Your Duties:	Annual Salary: StartLast Reason for Leaving
	May We Contact This Employer? Yes No
Full-Time Part-Time	

Your Job Title	Telephone Number()
Company Name	Employed Dates (Indicate Month, Day and Year)
Address	From: To:
	10
City, State, Zip	Annual Salary:
Name of Supervisor	Start Last
Describe Your Duties:	Reason for Leaving
	May We Contact This Employer? Yes No
	If No, Please Explain
Full-Time Part-Time	
Your Job Title	Telephone Number ()
Company Name	Employed Dates (Indicate Month, Day and Year)
Address	From: To:
City, State, Zip	
Name of Supervisor	Annual Salary: Start Last
Describe Your Duties:	
	May We Contact This Employer? Yes No
	If No, Please Explain
Full-Time Part-Time	

Your Job Title	Telephone Number
Company Name	Employed Dates (Indicate Month, Day and Year)
	From: To:
Address	FIOIII 10
City, State, Zip	Annual Salary:
Name of Supervisor	Start Last
Describe Your Duties:	Reason for Leaving
	May We Contact This Employer? Yes No
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Full-Time Part-Time	
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Company Name	Employed Dates (Indicate Month, Day and Year)
Address	From: To:
City, State, Zip	
Name of Supervisor	Annual Salary: Start Last
Describe Your Duties:	
	Reason for Leaving
	May We Contact This Employer? Yes No
	If No, Please Explain
Full-Time Part-Time	

Additional Skills

State any additional information you feel may be helpful to us in considering your application.

Indicate any professional licenses or certificates, license numbers, their expiration dates and issuing agency.

References:

List the name, address, and telephone number of at least three references who are not related to you and are not previous employers.

Name	Address	Telephone Number

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I understand that an investigation of all statements contained in this application for employment will be conducted, to include at a minimum: personal and business references; employment history; education/technical training; and military service. If a conditional offer of employment is extended, I understand that my hiring may be contingent upon successful completion of job-related testing, a medical examination, an alcohol and drug screening, a criminal background investigation, and a motor vehicle report. I agree, upon request, to sign all necessary authorization and consent forms.

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

I hereby authorize the Jackson Municipal Airport Authority to obtain information pertaining to my employment, attendance, performance reports, and disciplinary records from previous or current employers. I hereby authorize release of this information. This release is executed with full knowledge and understanding that the information is for the official use of the Jackson Municipal Airport Authority only as may be necessary in arriving at an employment decision.

I hereby release you, as the custodian of such records, from any and all liability for damages of any kind because of compliance with this <u>authorization</u>, and request you to release the information requested.

Please print all information legibly with black ink.

Full Name	S	Social Security #		
Current	Address			
City	State	Zip Code		
Telephone # (Day)	Telephone # (Eve	Telephone # (Evening)		
Signature of Applicant	Da	ite		