

## JACKSON MUNICIPAL AIRPORT AUTHORITY

*Connecting Jackson to the world, and the world to Jackson*

### JOB DESCRIPTION

<i>Job Title</i>	Manager of Public Relations & Customer Service	<i>Job Code</i>	<i>FLSA</i>	<i>Exempt</i>
<i>Job Family</i>	Managerial	<i>Grade</i>	35	
<i>Department</i>	Administration and Human Resource	<i>Created Date</i>		
<i>Reports to</i>	Director of Administration and Human Resource	<i>Revised Date</i>		

### JOB SUMMARY

The Manager of Public Relations & Customer Service is responsible for the Marketing and Advertising, Media Relations, Public Information, and Customer Service related initiatives. The successful candidate will plan and execute a Market and Communications Plan which includes the creation of brochures, reports, maps, briefing papers, special events, and presentation materials, as well as, govern all media interactions and events that may impact the Airport Authority and its image. The Manager will contribute to the development of the Airport's public information and community relation's programs and will be responsible for their implementation.

### ESSENTIAL DUTIES & RESPONSIBILITIES

- Serves as the principle spokesperson and JMAA involving public relations functions and initiatives.
- Establishes strong professional relationships in the internal and external communities and serves as an articulate spokesperson and representative of the Airport Authority and its workforce.
- Manages JMAA's customer service standards. Implements program elements and establishes performance matrixes and assessment tools to monitor the effectiveness of program.
- Responsible for overseeing art installations, removals, and performances.
- Coordinates with IT Manager on Airport web site development and revisions.
- May perform other duties as assigned.

### LEADERSHIP AND SUPERVISORY

- The position will work under the direction of the Director of Administration and Human Resource.
- The position will provide guidance to the Public Relations & Customer Service Specialist.

### EDUCATION & EXPERIENCE (including required licenses or certifications)

- Bachelor's Degree in marketing, communications, public relations, or similar field.
- Five to seven years of related experience in marketing, communications, and/or public relations.
- Must possess or be able to possess a Mississippi Driver's license.
- Be able to secure unrestricted access to secured areas.

- Ability to obtain AOA driving privileges.

## **COMPETENCIES**

### Employee Core

- *Customer Focus* - The ability to proactively meet the needs of internal and external customers in order to provide best-in-class customer experiences.
- *Continuous Improvement* - The knowledge of goal setting and measuring performance in order to improve processes and procedures.
- *Communication* - The ability to express thoughts effectively to encourage productive dialogue and generate useful information.
- *Collaboration* - The ability to work cooperatively with others to build the strength of the team.
- *Commitment* – The ability to take personal responsibility due to one’s sense of ownership and pride in the Authority.

### Job-Specific Knowledge, Skills & Abilities

- Knowledge of and special expertise in industry market strategies for air service, public relations, and strategic communications strategy development.
- Excellent writing and editing skills, with proven writing experience for myriad audiences in broadcast, print, web, and social media.
- Proven ability to multi-task, balance multiple priorities, and meet tight deadlines.
- Working knowledge of the latest new and social media best practices, search engine optimization, search engine marketing branding, and market research techniques and practices.
- Familiarity and comfort in a highly collaborative work environment.
- Ability to manage an internal communications program that informs and inspires.
- Demonstrated ability to manage projects from inception through execution.
- Ability to manage a marketing and communications budget.
- Design and implement effective programs and services for a diverse workforce.
- Demonstrate capacity to interact effectively with a diverse community, effectively negotiate, and solve problems.
- Contribute at both the strategic and tactical levels.
- Demonstrate strong management, leadership, and presentation skills.
- Demonstrate strong interpersonal skills; communicate clearly and concisely, both orally and in writing.
- Ability to proficiently use Microsoft Office Suite of products plus other applications specific to the graphic arts and communications field.
- Maintain confidentiality.

## **ENVIRONMENT & WORKING CONDITIONS**

- Work is performed in an office environment.

## **PHYSICAL DEMANDS** (including requirements for travel or working nights/weekends/holidays)

Requires:

- Visual, hearing acuity, and dexterity to operate office equipment.

*Reasonable accommodations may be made to enable individuals with disabilities to perform the essential duties of this job.*

## **Excellent Benefits include, but are not limited to:**

- \* Public Employees' Retirement System (PERS)
- \* Employer pays 100% of employees' medical, dental, life, long term disability and accidental death and dismemberment insurance.
- \* Employees earn vacation and medical leave on a monthly basis.
- \* Employees receive pay for 10 holidays and any other day proclaimed as a holiday.
- \* Educational Reimbursement available to all fulltime employees for educational expenses.

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](mailto:recruiter@jmaa.com)**  
**Acceptance deadline is April 9, 2018**  
**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:	Today's Date:
Name (Last)                      (First)                      (MI)	Social Security Number:
Address:	Telephone Number:
City                      State                      Zip	Date of Birth
Check One: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Check one of the following: (Ethnic Origin)	
<input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian/Alaskan Native	
<input type="checkbox"/> African American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Other _____	
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single	
Referral Source: <input type="checkbox"/> College/Tech School <input type="checkbox"/> Newspaper <input type="checkbox"/> Employment Agency	
<input type="checkbox"/> Walk-In <input type="checkbox"/> Friend/Relative <input type="checkbox"/> 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: **Manager of Public Relations and Customer Service**

ADVERTISEMENT PERIOD: **03/26/2018- 04/09/2018**

**PERSONAL**

NAME \_\_\_\_\_  
(Last) (First) (Middle Initial)

ADDRESS \_\_\_\_\_  
(Street Address) (City) (State) (Zip)

HOME PHONE NO. (\_\_\_\_) \_\_\_\_\_ ALTERNATE PHONE NO. (\_\_\_\_) \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_ EMAIL \_\_\_\_\_

DRIVER LICENSE # \_\_\_\_\_ Class \_\_\_\_\_ Expiration \_\_\_\_\_ State \_\_\_\_\_

When will you be available to begin if selected for the position? \_\_\_\_\_

Are you available to work shifts? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you authorized to work in the U.S. on an unrestricted basis? Yes \_\_\_\_\_ No \_\_\_\_\_

*(Proof of citizenship or immigration status will be required upon employment)*

Have you ever been employed with JMAA before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, give dates \_\_\_\_\_

Have you ever been convicted of a crime other than minor traffic violations? Yes \_\_\_\_\_ No \_\_\_\_\_

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 \_\_\_\_\_

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.

NAME: \_\_\_\_\_ SOCIAL SECURITY NO.: \_\_\_\_\_

**Education & Training**

	High School	College/Technical/Business	Graduate School
School Name & Location			
Years Completed (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, Apprenticeships, Skills, Extra-Curricular Activities, Foreign Languages:			

**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 No. (_____) _____
Company Name _____	Employed (Indicate Month, Day and Year)
Address _____ _____	From _____ To _____
Name of Supervisor _____	Annual Salary Start _____ Last _____
Describe Your Duties _____ _____ _____	Reason for Leaving _____
_____	May We Contact This Employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	If No, Please Explain _____
Full Time _____ Part-Time _____	

NAME: \_\_\_\_\_ SOCIAL SECURITY NO.: \_\_\_\_\_

Your Job Title _____ _____	Telephone No. (_____) _____
Company Name _____	Employed (Indicate Month, Day and Year)
Address _____ _____	From _____ To _____
Name of Supervisor _____	Annual Salary Start _____ Last _____
Describe Your Duties _____ _____ _____	Reason for Leaving _____
	May We Contact This Employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
	If No, Please Explain _____
Full Time _____ Part-Time _____	

Your Job Title _____ _____	Telephone No. (_____) _____
Company Name _____	Employed (Indicate Month, Day and Year)
Address _____ _____	From _____ To _____
Name of Supervisor _____	Annual Salary Start _____ Last _____
Describe Your Duties _____ _____ _____	Reason for Leaving _____
	May We Contact This Employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
	If No, Please Explain _____

Full Time_____	Part-Time_____
Your Job Title_____	Telephone No. (_____)
_____	
Company Name_____	Employed (Indicate Month, Day and Year)
Address_____	From _____ To
_____	
	Annual Salary
Name of Supervisor_____	Start _____ Last
_____	
Describe Your Duties_____	Reason for Leaving
_____	
_____	
_____	
_____	May We Contact This Employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	
_____	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.

---

---

---

---

---

---

---

---

**Professional References:**

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

Name	Title	Contact Information	Relationship


**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 understand that for Certified Police Officer positions, a psychological examination is also required. 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 authorization, and request you to release the information requested.

Please print all information legibly with black ink.

\_\_\_\_\_

Full Name Social Security Number

\_\_\_\_\_

Current Address

\_\_\_\_\_

Telephone Number(s) (Day) (Evening)

\_\_\_\_\_

Signature of Applicant Date