

Job Title: Accountant	Department: Finance
Reports To: Chief Financial Officer	FLSA Status: Non Exempt

POSITION SUMMARY

The Accountant is responsible for providing professional accounting support to senior management, producing monthly financial statements used to track revenue and expenses, and supporting the organization's financial stability. This position is responsible for external grant reimbursements and financial reporting requirements, including fixed assets and capital project accounting and balance sheet reconciliations.

Management reserves the right to assign, reassign or change duties and responsibilities to this job at any time due to reasonable accommodations or other reasons. Reasonable accommodations may be made to enable individuals with disabilities to perform essential functions.

ESSENTIAL FUNCTIONS

- Reconciles balance sheet and bank statements to General Ledger
- Reviews and tests sample parking lot revenue reports for collections accuracy and remittances to JMAA
- Prepares and reviews journal entries
- Prepares gasoline and diesel usage reconciliation
- Manages petty cash account by disbursing funds to staff and reconciling petty cash account.
- Maintains the fixed asset sub-ledger for JMAA's property (includes additions, deletions, and/or property updates).
- Maintains work-in-progress files for capital projects, closes out projects, and capitalizes fixed assets.
- Leads internal fixed assets audits
- Administers external grants by processing drawdown requests, preparing financial reports and grant updates; and facilitates grant closeouts
- Inputs and retrieves fiscal and statistical information from the computer
- Answers accounting questions and explains procedures to staff

Other Duties:

- Represents the organization, both internally and externally, by supporting the strategic direction, strategic priorities, objectives, vision, mission, and values of JMAA
- Provides courteous and prompt service to all internal and external parties; Prioritizes and addresses requests and assignments in a professional and cooperative manner
- Identifies opportunities and recommends methods to improve service, work processes and financial performance (e.g., procedure optimization); Assists in the implementation of quality improvement initiatives
- Assists co-workers in the completion of tasks and assignments to ensure continuity of service; Actively supports teamwork throughout the organization
- Performs other duties as assigned

SUPERVISORY RESPONSIBILITIES

This position has no supervisory responsibilities.

EDUCATION AND/OR EXPERIENCE

This position requires a Bachelor's Degree in Accounting or Finance. A Master's Degree in these or related field is preferred. The individual must have five years of experience in accounting and/or auditing. Experience working in a complex public sector environment with rapidly-changing needs, multiple sources of funding, multiple service contracts, and multi-agency contracts is strongly preferred. This position may require travel between JMAA's locations and, therefore, an individual must possess a valid Mississippi Driver's License and must be able to pass and maintain background and security clearances.

SKILLS AND ABILITIES

The individual must be able to read, analyze, and interpret financial reports, and legal documents; respond to common inquiries or complaints, regulatory agencies, or members of the business community; effectively present information to top management, public groups, and/or boards of directors. The individual must be able to discern problems, collect data, establish facts, and draw valid conclusions; interpret an extensive variety of technical instructions in mathematical or diagram form and deal with several abstract and concrete variables. To perform this job successfully, an individual should be computer competent and have knowledge of Munis, Payroll software, Microsoft Word, Excel, and Outlook. **Additionally, the individual must be attentive, dependable, ethical and professional in performing job functions and in being a part of the overall team.**

AMERICAN WITH DISABILITY SPECIFICATIONS

Physical Demands: The physical demands and work environment described here are representative of those that must be met by an employee to perform the essential functions of the job successfully with or without reasonable accommodations. While performing the duties of this job, the employee is regularly required to talk, hear, and listen. Specific vision abilities required by the job include close vision and the ability to focus. This job may require some combination of lifting up to 25 pounds occasionally, bending, squatting, stooping, and crouching. Tasks involve sitting and operating a computer for extended periods of time.

Work Environment: The work environment is considered to be that of a typical business/office operation. The noise level of the work environment is usually moderate.

NOTE: This job description 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. The organization reserves the right to change this description at its discretion.

This job description was approved on: _____, _____.
Date job description approved Approving Authority

SIGNATURES:

Employee	Date
Supervisor	Date

Demographic Data

Completion of this section is completely voluntarily.

EOE, M/F, D/V APPLICANT DATA RECORD

JMAA is subject to certain nondiscrimination and affirmative action recordkeeping and reporting requirements which require us to invite employees to voluntarily self-identify race/ethnicity and other personal demographic information. Providing this information is strictly voluntarily and refusal to complete this form will not affect your consideration for employment with JMAA.

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		MI
Check one:	Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Other	I do not wish to disclose Female
Check one:	Marital Status	<input type="checkbox"/> Married	<input type="checkbox"/> Single	

Check one of the following:

<input type="checkbox"/> White	<input type="checkbox"/> African American	<input type="checkbox"/> American Indian/Alaskan Native
<input type="checkbox"/> Hispanic	<input type="checkbox"/> Asian/Pacific Islander	<input type="checkbox"/> Other Specify: _____

How did you hear about us? Check one of the following:

<input type="checkbox"/> Walk-In	<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Friend/Relative
<input type="checkbox"/> Newspaper	<input type="checkbox"/> College/Tech School	<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: Accountant
ADVERTISEMENT PERIOD:

Personal:

Last Name	First Name	MI
Address		
City	State	Zip
SS last four digits (Because of identity theft concerns, many employers are not requiring SS#s on the application. What does JMAA use this information for?)		
Home Phone #	()	Mobile/Alternate Phone # ()
Email Address		
Driver License #	Class	Expiration
State		

Are you authorized to work in the U.S. on an unrestricted basis?

(Proof of identity and work authorization status will be verified upon employment)

*Are you at least 18 years or older? (Does JMAA allow employment of minors?) When will you be available to begin if selected for the position? Are you available to work shifts?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

(Would ask applicants to identify shifts availability)

*Can you work overtime, if required, including weekends

Yes No

Have you ever been employed with JMAA before?

If yes, give dates

Have you ever been convicted of a crime other than minor traffic violations? (EEOC is moving to ban this question from applications. The way the question is asked on this application is way too broad. May want to ask if the applicant has been convicted of a felony. Are there misdemeanors that would prevent an applicant from passing a background investigation?)

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 driver's 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 (circle)	9	10	11	12	1	2	3	4	1	2	3	4	5
*Degree Received													
* Subjects Studied/ Major													
Diploma/Degree (Verification of education required Describe Course of Study:													
Describe Specialized Training, Apprenticeships, 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 Number (_____)
Company Name _____	Employed Dates (Indicate Month, Day and Year)
Address _____	From: _____ To: _____
City, State, Zip _____	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 <input type="checkbox"/> Part-Time <input type="checkbox"/>	

Your Job Title _____	Telephone Number (_____) _____
Company Name _____	Employed Dates (Indicate Month, Day and Year)
Address _____	From: _____ To: _____
City, State, Zip _____	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 <input type="checkbox"/> Part-Time <input type="checkbox"/>	

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Company Name _____	Employed Dates (Indicate Month, Day and Year)
Address _____	From: _____ To: _____
City, State, Zip _____	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 <input type="checkbox"/> Part-Time <input type="checkbox"/>	

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Address _____	From: _____ To: _____
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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 <input type="checkbox"/> Part-Time <input type="checkbox"/>	

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Address _____	From: _____ To: _____
City, State, Zip _____	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 <input type="checkbox"/> Part-Time <input type="checkbox"/>	

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 the completion of this application nor does any other part of my consideration for employment establish any obligation for JMAA to hire me. If hired, I understand that either JMAA or I can terminate my employment at any time and for any reason, with or without prior notice.

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.

I attest with my signature below that the information I have given on this application is true, correct and complete. No requested information has been concealed and grant JMAA the authority to contact references provided for employment

reference checks. If any information I provided on this application is untrue or if I have concealed material information, I understand that this will constitute cause for the denial of employment or if employment has begun, immediate dismissal.

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 #
Current Address		
City	State	Zip Code
Telephone # (Day)	Telephone # (Evening)	
Signature of Applicant	Date	

Second sentence above should read: I hereby authorize any person, company, and or educational institution I have listed as a reference on my employment application to fully disclose in good faith any information they may have regarding my qualifications for employment.