

# **JOB APPLICATION PACKET:**

Position Opening:

**Communications Assistant** 

**Required Application Materials:** 

- 1. Letter of Application
- 2. Full Resume
- Completed MSHSAA "Application for Employment"
- 4. College Transcript

Applications will be accepted until the position is filled.

### **POSITION DESCRIPTION** Communications Assistant

**Job Summary:** The selected applicant will be involved in all aspects of the communications department under the daily direction of the Communications Director. Responsibilities will include desktop publishing, data entry, media relations, updating MSHSAA website and maintaining record-setting performance information.

**Work Schedule:** 35 hours per week; some overtime will be required. Assistance at various weekend events will be required.

#### **Benefits Include:**

- Paid health insurance
- annual paid vacation and sick leave
- 401k retirement plan
- Group Life Insurance

#### **Examples of Work Performed:**

- Publications design program covers; layout interior elements; review documents; organize production
- Media Relations work with local, state and national media outlets on credentialing for championship events; answer questions concerning various media policies
- Championship Events assist with set-up and coordination of championship events; work with staff onsite during events
- Website post results from championship events; assist with maintaining results and record sections
- Social Media using various social media platforms to provide information on Association events.
- Other opportunities may be available based upon applicant skill set.

#### **Qualifications:**

- Bachelor's Degree required in communications, journalism, sports management, or another program with verified work experience.
- This position requires daily computer operations in Microsoft Word, Microsoft Excel, InDesign, PhotoShop and Illustrator. The position will also require daily interaction with member schools, officials, and media.
- This position requires a sincere team attitude, strong verbal and written communications skills, broad knowledge of proper grammatical usage, strong keyboard and editing skills, and strong interpersonal abilities.
- This position requires strong organizational and time management skills, as well as the ability to work on several projects concurrently and the ability to cope with unforeseen situations.

The MSHSAA is an Equal Opportunity Employer and does not discriminate on the basis of sex, creed, color, national origin, disability or age.

MSHSAA Contact: Jason West, Communications Director Phone: (573) 875-4880 Address: MSHSAA, P.O. Box 1328, Columbia, MO 65205-1328 Located at 1 N Keene St., Columbia

Please return application packet by mail or in person at the MSHSAA Office.

# **APPLICATION FOR EMPLOYMENT**

Missouri State High School Activities Association P.O. Box 1328, Columbia, MO 65205-1328; Phone - 573/875-4880; Fax 573/875-2379

#### Provide all information requested by printing CLEARLY in ink or typing.

#### **GENERAL INFORMATION**

| Name (Last)  | (First) |  | (Middle Initial)       | Home Telephone    |
|--|---------|--|------------------------|-------------------|
|  |         |  |                        | ( ) -             |
| Address (Mailing Address)  | (City)  | (State   | (Zip)                  | Daytime Telephone |
|  |         |  |                        | ( ) -             |
| What phone number should we use to speak with you? What times wo |         | be the best times to reach you by telephone? List 3. |                        |                   |
| ( ) -  | 1)      | 2)   |                        | 3)                |
| E-Mail Address   |         |  |                        | -                 |
|  |         | Are you legally e                                    | ntitled to work in the | U.S.? 🗌 Yes 🗌 No  |

#### POSITION

**Adobe Photoshop** 

**MSHSAA Website** 

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| For which posted position are you applying?  | Will Accept:   |
|--|----------------|
|  | Part-Time      |
| Are you able to perform the essential functions of the job you are applying for, with or | Full-Time      |
| without reasonable accommodation?  Yes  No   | Temporary      |
| Accommodations needed (please list if any are required):                                 | Date Available |
|  |                |

#### **EDUCATION AND TRAINING**

| Name of High School: City:   |                                 |                   |                        |                     |
|--|---------------------------------|-------------------|------------------------|---------------------|
| High School Graduate?   Yes No If no, list the highest grade completed:  |                                 |                   |                        |                     |
| Interscholastic Activities in which you participated in HS:              |                                 |                   |                        |                     |
| Any special honors or recognition received:                              |                                 |                   |                        |                     |
| College, Business School, Military, F                                    | Post-Graduate Stud              | lies (if any)     | (Most recent first)    |                     |
| Name and Location  | Dates<br>Attended<br>Month/Year | Graduate          | Degree<br>& Year       | Major<br>or Subject |
|  | From                            |                   |                        |                     |
|  | То                              | ∐ No              |                        |                     |
|  | From                            | 🗌 Yes             |                        |                     |
|  | То                              | 🗌 No              |                        |                     |
|  | From                            | ☐ Yes             |                        |                     |
|  | То                              |                   |                        |                     |
|  | From                            | ☐ Yes             |                        |                     |
|  | То                              |                   |                        |                     |
| COMPUTER APPLICATIONS (Please check the level that describes your skill) |                                 |                   |                        |                     |
| General Computer Skills  | Unable 🗌 Aver                   |                   | ood 🗌 Superior         |                     |
| Microsoft Word   | Unfamiliar 🗌 Aver               |                   | ood 🗌 Superior         |                     |
| Microsoft Excel  | │Unfamiliar                     | • =               | bodSuperiorbodSuperior |                     |
| Microsoft PowerPoint   | Unfamiliar Aver                 | <b>v</b> <u>=</u> | bod Superior           |                     |
| Adobe InDesign   | Unfamiliar 🗌 Aver               |                   | ood 🗌 Superior         |                     |
| Adobe Illustrator  | Unfamiliar 🗌 Aver               |                   | ood 🗌 Superior         |                     |

Average

Superior

Good

🗌 Unfamiliar

] Unfamiliar

#### CLERICAL & TECHNICAL SKILLS (Please check the level that describes your skill)

| Typing Skills: WPM:              | Unable       | Average | Good   | Superior |
|----------------------------------|--------------|---------|--------|----------|
| Fax Machine                      | 🔲 Unfamiliar | Average | 🔲 Good | Superior |
| Copy Machine                     | 🗌 Unfamiliar | Average | 🗌 Good |          |
| Multiline Corporate Phone System | 🗌 Unfamiliar | Average | 🗌 Good | Superior |

## WORK EXPERIENCE (Most Recent First) (Include voluntary work and military experience)

| Employer           | Telephone Number (                    | ) -                   | From (Month/Year)   |
|--------------------|---------------------------------------|-----------------------|---------------------|
| Address            |                                       | •                     |                     |
| Job Title          |                                       |                       | To (Month/Year)     |
| Specific Duties    |                                       |                       |                     |
|                    |                                       |                       | Hours Per Week      |
|                    |                                       |                       |                     |
|                    |                                       |                       | Last Salary         |
|                    |                                       |                       |                     |
|                    |                                       |                       | Supervisor          |
|                    |                                       |                       |                     |
| Reason For Leaving |                                       | May We Contact This E | mployer? 🗌 Yes 🗌 No |
| Employer           | Telephone Number (                    | ) -                   | From (Month/Year)   |
| Address            |                                       | •                     |                     |
| Job Title          |                                       |                       | To (Month/Year)     |
| Specific Duties    |                                       |                       |                     |
|                    |                                       |                       | Hours Per Week      |
|                    |                                       |                       |                     |
|                    |                                       |                       | Last Salary         |
|                    |                                       |                       |                     |
|                    |                                       |                       | Supervisor          |
|                    |                                       |                       |                     |
| Reason For Leaving |                                       | May We Contact This E | mployer? Yes No     |
| Employer           | Telephone Number (                    | ) -                   | From (Month/Year)   |
| Address            |                                       |                       |                     |
| Job Title          |                                       |                       | To (Month/Year)     |
| Specific Duties    |                                       |                       |                     |
|                    |                                       |                       | Hours Per Week      |
|                    |                                       |                       |                     |
|                    |                                       |                       | Last Salary         |
|                    |                                       |                       |                     |
|                    |                                       |                       | Supervisor          |
|                    |                                       |                       |                     |
| Reason For Leaving |                                       | May We Contact This E | mployer? 🗌 Yes 🗌 No |
| Employer           | Telephone Number (                    | ) -                   | From (Month/Year)   |
| Address            | · · · · · · · · · · · · · · · · · · · | •                     |                     |
| Job Title          |                                       |                       | To (Month/Year)     |
| Specific Duties    |                                       |                       |                     |
|                    |                                       |                       | Hours Per Week      |
|                    |                                       |                       |                     |
|                    |                                       |                       | Last Salary         |
|                    |                                       |                       |                     |
|                    |                                       |                       | Supervisor          |
|                    |                                       |                       |                     |
| Reason For Leaving |                                       | May We Contact This E | mployer? Yes No     |

#### **REFERENCES** (Give the name, address and telephone number of three references)

| Name:                              | Name:                              | Name:                              |
|------------------------------------|------------------------------------|------------------------------------|
| Address:                           | Address:                           | Address:                           |
|                                    |                                    |                                    |
| Phone:                             | Phone:                             | Phone:                             |
| Title and Connection to Applicant: | Title and Connection to Applicant: | Title and Connection to Applicant: |
|                                    |                                    |                                    |

#### **CERTIFICATION OF ACCURACY:**

I certify the information contained in this application is true, correct, and complete. To determine my qualifications for employment I authorize MSHSAA to conduct an investigation of my application. I understand that any false or misleading information furnished by me on this application form or in connection with my application for employment may result in rejection of the application, or if employed by MSHSAA, in the termination of employment. I understand that employment is subject to the results of a criminal background check. <u>DATE OF BIRTH</u> IS REQUIRED FOR BACKGROUND CHECK.

| Signature of Applicant | _ Date of Birth | Today's Date |
|------------------------|-----------------|--------------|
|------------------------|-----------------|--------------|

Please return by mail or in person to:

MSHSAA Office – Position Opening Attn: Stacy Schroeder P.O. Box 1328 Columbia, MO 65205-1328

MSHSAA Use: