

# Parking Ambassador (Part Time)

## Job Description

**Directly Reports To:** Deputy Executive Director of the Office of the Parking Authority/Office of Community Development

The City of Pittston Parking Authority is currently seeking an out-going and energetic candidate for Parking Ambassador. The Parking Ambassador will perform a variety of duties related to the enforcement of City of Pittston parking ordinances. The position is also responsible for assisting customers and maintaining parking equipment. Work is performed under limited supervision with moderate latitude. Position relies on experience and exercises independent judgment to determine the best approach by using and interpreting policies and procedures, but must also be able to carry out directions.

### Major Responsibilities and Duties:

- Provide customer service by answering questions regarding directions, events, building locations and parking policies.
- Issue citations and warnings for non-compliance with a computerized hand held computer or manual tickets.
- This position requires the ability to work alone and therefore must exercise proper judgement, tact and diplomacy dealing with people.
- Assist maintenance staff with duties related to parking equipment upkeep and maintenance. This includes, but is not limited to: inspecting and assessing lots for maintenance issues, cleaning and repairing parking meters and pay stations, installing signs, sign posts and meter posts.
- Collect and secure all monies received through parking meters and pay stations and deposit the receipts in the appropriate bank account(s).
- Assist maintenance staff with activities related to parking for events. This includes, but is not limited to: no parking signs and meter covers.
- Other related duties as assigned.

### Knowledge, Skills and Abilities:

- Knowledge of relevant policies, procedures, and strategies to promote effective local parking ordinances and state parking laws
- Knowledge of mechanical equipment for minor repairs and stocking supplies
- Skill in working independently and following through with assignments with minimal direction
- Skill in the use of Microsoft Office products (Word and Outlook)
- Skill in providing good customer service
- Ability to establish and maintain effective and cooperative working relationships with those contacted in the course of work
- Ability to manage time and workload effectively which includes planning, organizing, and prioritizing with attention to details
- Ability to safely operate the parking enforcement vehicle (if and when provided)
- Ability and stamina to walk long distances and endure all types of weather conditions

- Ability to read, comprehend and apply parking laws and ordinances
- Ability to deal with the public with tact and good judgment
- Ability to communicate effectively, verbally and in writing

**Minimum Qualifications:** High school diploma or GED; supplemented by two or more years of customer service or parking enforcement experience; or an equivalent combination of education, certification, training, and/or experience. Must possess a valid Pennsylvania driver's license. Must pass a physical and drug test.

**Availability to Work:** Monday-Saturday between the hours of 8am-6pm. Special shifts may be required during special events or holidays. Shifts will be rotated and issued ahead of time by the Deputy Executive Director.

**Physical Demands and Work Environment:** While performing the duties of this job, the employee is regularly required to stand and walk. Employees are regularly exposed to outside weather conditions including snow and heat. Occasional lifting and use of tools required.

Employees work in and around potentially dangerous traffic situations and employees are to be safety conscious at all times.

**Applications are due May 24, 2019 by 4pm. Please return in person or by mail to the Pittston Parking Authority, 35 Broad St. Suite 202, Pittston, PA 18640. If you would like to email your application, submit to [mkuna@pittstonrda.com](mailto:mkuna@pittstonrda.com).**

**PITTSTON PARKING AUTHORITY**

35 Broad Street  
Pittston, PA 18640  
570.654.4601

**APPLICATION  
FOR  
EMPLOYMENT**

---

**Please note:** This is a pre-employment questionnaire. Completion of this application is only the first step of a multi-step hiring process. To be considered, applications must be completely filled out and signed, any additional information required in the announcement included, and be received in by the Pittston Parking Authority by the deadline stated in the announcement. **The Pittston Parking Authority is an equal opportunity employer** and does not discriminate on the basis of sex, age, race, sexual orientation, disability, religion, or marital status.

---

**POSITION APPLYING FOR:** \_\_\_\_\_

**DATE OF APPLICATION:** \_\_\_\_\_

---

**APPLICANT INFORMATION:** (PLEASE PRINT ALL INFORMATION!)

**FULL NAME:** \_\_\_\_\_

**SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**CURRENT ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**PREVIOUS ADDRESS IF LESS THAN THREE (3) YEARS AT PRESENT ADDRESS:**

\_\_\_\_\_

**TELEPHONE:** ( ) \_\_\_\_\_ **CELLPHONE:** ( ) \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

---

**DO NOT WRITE IN THIS AREA--ADMINISTRATION DEPARTMENT USE ONLY:**

**Date Received:** \_\_\_\_\_

**Printed Name of Staff Recipient:** \_\_\_\_\_

**Signature of Staff Recipient:** \_\_\_\_\_

**EDUCATION:**

HIGH SCHOOL NAME AND ADDRESS: \_\_\_\_\_

DATES ATTENDED: FROM \_\_\_\_\_ TO \_\_\_\_\_

DID YOU GRADUATE: \_\_\_\_ YES \_\_\_\_ NO \_\_\_\_ GED (DATE): \_\_\_\_\_

COLLEGE/UNIVERSITY NAME AND ADDRESS: \_\_\_\_\_

DATES ATTENDED: FROM \_\_\_\_\_ TO \_\_\_\_\_

FIELD OF STUDY: \_\_\_\_\_

DID YOU GRADUATE: \_\_\_\_ YES (DEGREE TYPE): \_\_\_\_\_ NO: \_\_\_\_\_

COLLEGE/UNIVERSITY NAME AND ADDRESS: \_\_\_\_\_

DATES ATTENDED: FROM \_\_\_\_\_ TO \_\_\_\_\_

FIELD OF STUDY: \_\_\_\_\_

DID YOU GRADUATE: \_\_\_\_ YES (DEGREE TYPE): \_\_\_\_\_ NO: \_\_\_\_\_

OTHER SCHOOL NAME AND ADDRESS: \_\_\_\_\_

DATES ATTENDED: FROM \_\_\_\_\_ TO \_\_\_\_\_

FIELD OF STUDY: \_\_\_\_\_

DID YOU GRADUATE: \_\_\_\_ YES (DEGREE TYPE): \_\_\_\_\_ NO: \_\_\_\_\_

OTHER EDUCATION/SKILLS: \_\_\_\_\_

**LANGUAGE PROFICIENCY:**

ENGLISH:	_____	READ	_____	WRITE
SPANISH:	_____	READ	_____	WRITE
OTHER:	_____	READ	_____	WRITE
SIGN LANGUAGE	_____	YES		

**MILITARY SERVICE:**

NO       YES--BRANCH & DATES OF SERVICE: \_\_\_\_\_

(A conviction will not necessarily disqualify you from employment)

**CRIMINAL HISTORY:** Have you been convicted of a local, state or federal offense?

YES       NO

If "YES" PLEASE EXPLAIN: \_\_\_\_\_

**EMPLOYMENT HISTORY:**

Dates of Employment	Employer Name, Address, Telephone	Position Title	Reason for Leaving

May We Contact Your Current Employer?      YES      NO

**REFERENCES:**

NAME & ADDRESS	TELEPHONE & EMAIL	RELATIONSHIP TO APPLICANT

**OTHER INFORMATION:**

How many hours are you available to work per week? \_\_\_\_\_

Date available to start? \_\_\_\_\_

---

**DRIVER'S LICENCE:**

DRIVER'S LICENSE TYPE:    \_\_\_\_\_ REGULAR                    \_\_\_\_\_ CDL                    \_\_\_\_\_ NONE

DRIVER'S LICENSE NUMBER: \_\_\_\_\_ STATE OF ISSUE: \_\_\_\_\_

*Note: Please refer to the particular job announcement to determine whether the position requires a driver's license and if so, what type.*

---

**CERTIFICATION:**

By signing this application I certify that the statements made in this application are true and complete to the best of my knowledge and understanding, and understand that, if employed, falsified statements on this application shall be grounds for termination.

I authorize the investigation of all statements contained herein and the references and employers listed within this application to provide any and all information concerning my references, current and previous employment and any pertinent information they may have, personal or otherwise, and release the municipality from any and all liability for any damage that may result from the utilization of such information.

I understand that in accordance with the requirements of particular positions as indicated in the job announcement, additional information, such as a criminal background check, drug-test, and or credit check may be required as part of the application and or employment offer.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disability Act (ADA) or other relevant state, federal and local laws.

SIGNATURE OF APPLICANT: \_\_\_\_\_

DATE: \_\_\_\_\_

**CONFIDENTIAL**

**Pittston Parking Authority  
Background Check Authorization**

Print Name: \_\_\_\_\_  
(First) (Middle) (Last)

Former Name(s) and Dates Used: \_\_\_\_\_

Current Address Since: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Drivers License Number/State: \_\_\_\_\_

The information contained in this application is correct to the best of my knowledge. I hereby authorize **Pittston Parking Authority** and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to **Pittston Parking Authority** or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I hereby release **Pittston Parking Authority**, the Social Security Administration, and its agents, officials, representative, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_