Career Opportunity
This is not a Federal Position

We are currently accepting applications to fill the following vacancies:

Parking Supervisor
Smithsonian National Zoo, Parking Operations
Announcement Number SE-22-0135

Multiple vacancies may be filled from this announcement.

<table>
<thead>
<tr>
<th>OPEN DATE:</th>
<th>March 24, 2022</th>
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</thead>
<tbody>
<tr>
<td>CLOSING DATE:</td>
<td>April 6, 2022</td>
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<td>PAY BAND:</td>
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<tr>
<td>SALARY RANGE:</td>
<td>$35,000 - $38,000 Annually (Commensurate with Experience)</td>
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<tr>
<td>POSITION TYPE:</td>
<td>Trust Fund</td>
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<tr>
<td>APPOINTMENT TYPE:</td>
<td>Indefinite</td>
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<tr>
<td>SCHEDULE:</td>
<td>Full Time</td>
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<tr>
<td>DUTY LOCATION:</td>
<td>Smithsonian National Zoo, Washington DC</td>
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</table>

Who may be considered for employment: Qualified candidates who are U.S. employment eligible. The Smithsonian provides reasonable accommodations to applicants with disabilities. If you need a reasonable accommodation for the application or hiring process please call 202-633-6409 (TTY).

The Smithsonian Institution is an Equal Opportunity Employer. We believe that a workforce comprising a variety of educational, cultural, and experiential backgrounds support and enhance our daily work life and contribute to the richness of our exhibitions and programs.

KEY REQUIREMENTS

- Pass Pre-Employment Background Check and Subsequent Background Investigation for a position designated as Low Risk
- Complete a 1-year Probationary Period
- Maintain a Bank Account for Direct Deposit/Electronic Transfer
- Males born after 12/31/59 must be registered with Selective Service.
- Authorized to work in the U.S. without sponsorship

For the latest information on the COVID-19 vaccination requirements and its impact on your application, click on Smithsonian Institution’s Frequently Asked Questions.

OVERVIEW

The Parking Supervisor assists the Parking Manager & Assistant Parking Manager with the operation of the parking business to maximize the visitor experience by ensuring resources are dedicated to providing excellent service and experiences. The Parking Supervisor is responsible for assisting with parking operations, as well as with monitoring coverage, fee collection, shifting of staff as needed to adjust to visitor flow, and ensuring proper business operations are established and maintained.

ESSENTIAL DUTIES AND RESPONSIBILITIES include, but are not limited to, the following:

- Models and provides courteous, professional and knowledgeable service to both internal and external customers.
- Assists in opening and closing parking operations location, as well as cash control operations.
- Performs basic cleaning and maintenance and maintains appropriate signage.
• Leads team of parking associates in absence of Parking Manager/Assistant Manager to ensure operational goals are met, customer service standards are upheld, and schedules are followed.
• Participates in the training of new parking associates and provides guidance and information as necessary.
• Resolves visitor complaints and special needs situations, referring those of a more complex nature to higher-level management.
• Supports Zoo events and activities involving Parking Operations.
• Conducts daily staff meetings in the absence of Parking Manager/Assistant Manager to motivate employees and exchange information.
• Operates and maintains computer and cash register systems, maintains supplies, and reports any technical issues.
• Monitors ticket sales, refunds and exchanges. Conducts returns, exchanges, voids and other ancillary cash handling functions. Ensures cash handling procedures are followed.
• Responsible for the careful and safe operation of all company vehicles, as well as vehicle cleanliness.
• Suggests improvements that will enhance the GUEST service, security, appearance, and profitability of the parking operation.
• Implements and monitors staff compliance for safety procedures.

*Zoo employees may be working outside under varying and sometimes extreme weather conditions – both hot and cold - and may work in a confined and limited space. Zoo terrain varies, and includes steep inclines, stairs/steps, and uneven surfaces.*

Candidates must be available weekends, holidays, and evenings, be able to move or lift up to 25 pounds and to walk and stand for long periods of time.

**Education, Qualifications, and Requirements**

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Bachelor’s degree (BS) or equivalent; or 1 to 3 years related experience and/or training; or equivalent combination of education and experience. Parking operations, retail, and/or hospitality industry experience required.

- Operations, POS/cash register, and cash management experience
- Solid track record of modeling superior customer service
- Experience with high volume crowd/traffic control, loss prevention, and safety compliance
- Keen attention to detail, with solid communication skills
- Ability to work a flexible schedule (evening, weekend, and holiday availability required)
- Knowledge of Microsoft Office suite
- Possess and maintain a valid U.S Driver License

Ability to read and interpret Smithsonian Institution and SE Museum Store policies and procedures, and understand standard retail concepts and practices. Ability to accept written and oral instructions from the Management Team. The employee must frequently lift and/or move up to 10 pounds and occasionally lift and/or move up to 25 pounds.

Applicants, who wish to qualify based on education completed outside the United States, must be deemed equivalent to higher education programs of U.S. Institutions by an organization that specializes in the interpretation of foreign educational credentials. This documentation is the responsibility of the applicant and should be included as part of your application package.

Any false statement in your application may result in your application being rejected and may also result in termination after employment begins.

**Smithsonian Enterprises** is a division of the Smithsonian Institution, the world’s largest museum and research organization. Established in 1846 with a bequest from English Scientist James Smithson, the Institution currently
encompasses 19 museums and galleries, the National Zoo and 9 research centers. The Smithsonian has facilities in 7 states, the District of Columbia and the Republic of Panama supporting over 6,200 employees.

**Smithsonian Enterprises** encompasses *Smithsonian* and *Air & Space* magazines, Museum stores, Restaurants, IMAX theaters and the Smithsonian Catalog, Consumer products, Educational travel, e-commerce, and commercial media enterprises in book publishing and the Smithsonian TV Channel.

The Smithsonian Institution values and seeks a diverse workforce. Join us in "Inspiring Generations through Knowledge and Discovery."

<table>
<thead>
<tr>
<th>Please forward a resume and cover letter to:</th>
<th><a href="mailto:sezoojobs@si.edu">sezoojobs@si.edu</a></th>
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<tbody>
<tr>
<td>Please include the position title in the subject line.</td>
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</table>

Once the vacancy announcement closes, a review of your resume will be made compared to the qualifications and experience as it applies to this job. **What to expect next:** After a review of applicants is complete, qualified candidates’ résumés will be referred to the hiring manager.

Relocation expenses are not paid.

The Smithsonian offers a number of exceptional benefits to its employees who qualify. Benefit programs include:

- Health, Dental & Vision Insurance, Life Insurance, Transit/Commuter Benefits, Accidental Death and Dismemberment Insurance, Annual and Sick Leave, Family Friendly Leave, 403b Retirement Plan,
- Discounts for Smithsonian Memberships, Museum Stores and Restaurants, Credit Union, Smithsonian Early Enrichment Center (Child Care), Flexible Spending Account (Health & Dependent Care)

We ask that the attached Applicant Survey Form be completed by all candidates, except *Smithsonian Institution employees*, and returned with application materials. This form is optional, and is used for gathering statistical information and will not be a part of the application.
YOUR PRIVACY IS PROTECTED

This information is used to determine if our equal employment opportunity efforts are reaching all segments of the population, consistent with Federal equal employment opportunity laws. Responses to these questions are voluntary. Your responses will not be shown to the panel rating the applications, to the official selecting an applicant for a position, or to anyone else who can affect your application. This form will not be placed in your Personnel file nor will it be provided to your supervisors in your employing office should you be hired. The aggregate information collected through this form will be kept private to the extent permitted by law. See the Privacy Act Statement below for more information.

Completion of this form is voluntary. No individual personnel selections are made based on this information. There will be no impact on your application if you choose not to answer any of these questions.

Thank you for helping us to provide better service.

1. How did you learn about this position? (Check One):
   - □ Agency Internet Site recruitment
   - □ Private Employment Web Site
   - □ Other Internet Site
   - □ Job Fair
   - □ Newspaper or magazine
   - □ Agency or other Federal government on campus
   - □ School or college counselor or other official
   - □ Friend or relative working for this agency
   - □ Private Employment Office
   - □ Agency Human Resources Department (bulletin board or other announcement)
   - □ Federal, State, or Local Job Information Center
   - □ Other

2. Sex (Check One):
   - □ Male
   - □ Female

3. Ethnicity (Check One):
   - □ Hispanic or Latino - a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
   - □ Not Hispanic or Latino

4. Race (Check all that apply):
   - □ American Indian or Alaska Native - a person having origins in any of the original peoples of North or South America (including Central America), and who maintains tribal affiliation or community attachment.
   - □ Asian - a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, or Vietnam.
   - □ Black or African American - a person having origins in any of the black racial groups of Africa.
   - □ Native Hawaiian or Other Pacific Islander - a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific islands.
   - □ White - a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
5. Disability/Serious Health Condition

The next questions address disability and serious health conditions. Your responses will ensure that our outreach and recruitment policies are reaching a wide range of individuals with physical or mental conditions. Consider your answers without the use of medication and aids (except eyeglasses) or the help of another person.

A. Do you have any of the following? Check all boxes that apply to you:

- □ Deaf or serious difficulty hearing
- □ Blind or serious difficulty seeing even when wearing glasses
- □ Missing an arm, leg, hand, or foot
- □ Paralysis: Partial or complete paralysis (any cause)
- □ Significant Disfigurement: for example, severe disfigurements caused by burns, wounds, accidents, or congenital disorders
- □ Significant Mobility Impairment: for example, uses a wheelchair, scooter, walker or uses a leg brace to walk
- □ Significant Psychiatric Disorder: for example, bipolar disorder, schizophrenia, PTSD, or major depression
- □ Intellectual Disability (formerly described as mental retardation)
- □ Developmental Disability: for example, cerebral palsy or autism spectrum disorder
- □ Traumatic Brain Injury
- □ Dwarfism
- □ Epilepsy or other seizure disorder
- □ Other disability or serious health condition: for example, diabetes, cancer, cardiovascular disease, anxiety disorder, or HIV infection; a learning disability, a speech impairment, or a hearing impairment (if this applies to you, please go to Section A.1.)

If you did not select one of the options above, please indicate whether:

- □ None of the conditions listed above apply to me.
- □ I do not wish to answer questions regarding disability/health conditions.

A.1. Other Disability or Serious Health Condition (Optional)

You indicated that you have a disability or a serious health condition. If you are willing, please select any of the conditions listed below that apply to you. As explained above, your responses will not be shown to the panel rating the applications, to the selecting official, or to anyone else who can affect your application. All responses will remain private to the extent permitted by law. See the Privacy Act Statement below for more information.

Please check all that apply:

- □ I do not wish to specify any condition.
- □ Alcoholism
- □ Cancer
- □ Cardiovascular or heart disease
- □ Crohn’s disease, irritable bowel syndrome, or other gastrointestinal impairment
- □ Depression, anxiety disorder, or other psychological disorder
- □ Diabetes or other metabolic disease
- □ Difficulty seeing even when wearing glasses
- □ Hearing impairment
- □ History of drug addiction (but not currently using illegal drugs)
- □ HIV Infection/AIDS or other immune disorder
- □ Kidney dysfunction: for example, requires dialysis
- □ Learning disabilities or ADHD
- □ Liver disease: for example, hepatitis or cirrhosis
- □ Lupus, fibromyalgia, rheumatoid arthritis, or other autoimmune disorder
- □ Morbid obesity
- □ Nervous system disorder: for example, migraine headaches, Parkinson’s disease, or multiple sclerosis
- □ Non-paralytic orthopedic impairments: for example, chronic pain, stiffness, weakness in bones or joints, or some loss of ability to use parts of the body
Orthopedic impairments or osteo-arthritis
Pulmonary or respiratory impairment: for example, asthma, chronic bronchitis, or TB
Sickle cell anemia, hemophilia, or other blood disease
Speech impairment
Spinal abnormalities: for example, spina bifida or scoliosis
Thyroid dysfunction or other endocrine disorder
Other. Please identify the disability/health condition, if willing: _________________________

PRIVACY ACT AND PAPERWORK REDUCTION ACT STATEMENTS

Privacy Act Statement: This Privacy Act Statement is provided pursuant to 5 U.S.C. 552a (commonly known as the Privacy Act of 1974). The authority for this form is 5 U.S.C. 7201, which provides that the Office of Personnel Management shall implement a minority recruitment program, by the Uniform Guidelines on Employee Selection Procedures, 29 C.F.R. Part 1607.4, which requires collection of demographic data to determine if a selection procedure has an unlawful disparate impact, and by Section 501 of the Rehabilitation Act of 1973, which requires federal agencies to prepare affirmative action plans for the hiring and advancement of people with disabilities. Data relating to an individual applicant are not provided to selecting officials. This form will be seen by Human Resource personnel in the Office of Personnel Management (who are not involved in considering an applicant for a particular job) and by Equal Employment Opportunity Commission officials who will receive aggregate, non-identifiable data from the Office of Personnel Management derived from this form.

Purpose and Routine Uses: The aggregate, non-identifiable information summarizing all applicants for a position will be used by the Office of Personnel Management and by the Equal Employment Opportunity Commission to determine if the executive branch of the Federal Government is effectively recruiting and selecting individuals from all segments of the population. Effects of Nondisclosure: Providing this information is voluntary. No individual personnel selections are made based on this information. There will be no impact on your application if you choose not to answer any of these questions.

Paperwork Reduction Act Statement: The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et. seq,) requires us to inform you that this information is being collected for planning and assessing affirmative employment program initiatives. Response to this request is voluntary. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. The estimated burden of completing this form is five (5) minutes per response, including the time for reviewing instructions. Direct comments regarding the burden estimate or any other aspect of this form to [INSERT: Agency name and address] and to the Office of Management Budget, Office of Information and Regulatory Affairs, Washington, DC 20503.