

Township of Parsippany-Troy Hills

OPEN POSITION ANNOUNCEMENT

Public Information Officer

Department: Executive Office

Workweek: Monday through Friday, 9:00 AM to 5:00 PM – subject to change based upon the needs of the Department and the Township. Must be available to work emergency and non-emergency hours, including weekends and holidays.

Wage: Per Ordinance, Salary Range \$27,550 – \$92,000 White Collar Non-Exempt

Definition: Under direction, plans, directs, and performs work involved in the collection, preparation, and dissemination of information regarding the plans, goals, programs, and achievements of the agency or jurisdiction through newspaper, radio, television, flyers, periodicals, and other media; furnishes advice and consultation to management concerning the information needs of the public; does other related duties.

Note: The definition and examples of work for this title are for illustrative purposes only. A particular position using this title may not perform all duties listed in this job specification. Conversely, all duties performed on the job may not be listed.

Skills/Duties: Determines the objectives of the information program and the methods by which they will be put in to effect of available resources, plans media coverage and methods to present the desired information to the public.

Ability to evaluate the public information on a variety of subjects relevant to Township operations.

Ability to analyze, select and present information in a suitable form for presentation and uses by varied public information media.

Ability to plan, organize and direct various public information programs.

Must possess a current New Jersey Driver's License. High School diploma or GED and subject to pre-employment drug testing.

To Apply: Please submit cover letter, and resume to Khaled Madin, Acting Business Administrator at jobs@parsippany.net, with a copy to Lisa Arcuri at larcuri@parsippany.net.

Closing Date: Open until filled. EOE. Excellent benefits package provided.

Date Posted: _____

Posted By: _____

Department: _____

(Return the original signed form to L. Arcuri, Administrator's Office. Post the copy)