

CITY OF MILFORD

OPEN COMPETITIVE EXAM NO. 24-38

PROCESS OPERATOR -WASTEWATER DIVISION PUBLIC WORKS DEPARTMENT

RE-POSTING DATE: April 19, 2024

CLOSING DATE: Open until filled

NOTICE TO ALL APPLICANTS: This opening is available to all City employees and the general public.

<u>SUMMARY OF POSITION</u>: Under the general supervision of the Superintendent of Wastewater or designee performs skilled, technical work involving the operation and maintenance of equipment and facilities of wastewater treatment plants and lift stations.

<u>MINIMUM QUALIFICATIONS</u>: Graduation from an accredited high school or trade school with wastewater treatment courses and/or six (6) months of wastewater treatment plant operations experience.

<u>SPECIAL REQUIREMENT</u>: Possession of State of Connecticut Class II Wastewater Treatment Facility Operator's Certification or ability to obtain in a period of time not to exceed four (4) years from the date of appointment. Any requests for extension of this timeframe will be reviewed on a case by case basis.

<u>SCOPE OF EXAMINATION</u>: Applicants, who meet the requirements as stated above will be invited to participate in a written examination, weighted 50%. Those who receive a score of 70% or better on the written exam will then be scored on the answers provided on Application Supplement #24-38 and weighted 50%. Candidates must achieve a total overall score of 70% or better to be considered.

FILING REQUIREMENTS: Applicants are required to fully complete an Employment Application, Application Supplement #24-38 and resume must be submitted to the Human Resources Department, Parsons Office Complex, 70 W. River St., Milford, CT or <u>HRrecruit@ci.milford.ct.us</u>. For forms and detailed application instructions, go to <u>www.ci.milford.ct.us/hr/pages/jobs</u> then select *Process Operator – Wastewater Division*. A resume will not be accepted in lieu of a completed job application/supplement; incomplete or illegible applications will be rejected.

SALARY RANGE: The position is a Grade PW08 with hourly salary limits as follows:

Minimum	.\$25.56*
Step 1	26.23
Step 2	26.88
Step 3	27.54
Step 4	28.14
Step 5	28.84
Maximum	29.51

*Note: New employees are customarily hired at the minimum salary.

The City of Milford offers a **generous benefits package** that includes: health insurance, life insurance, defined benefit plan (pension), 457 savings plan, paid time off (vacation, sick, personal business), paid holidays (13 days per year), and Employee Assistance Program.

PROCESS OPERATOR-Wastewater (Supplement Attached.)

GENERAL SUMMARY OF DUTIES

Under the general supervision of the Superintendent of Wastewater or designee performs skilled, technical work involving the operation and maintenance of equipment and facilities of wastewater treatment plants and lift stations.

ESSENTIAL FUNCTIONS

(The essential functions or duties listed below are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related or a logical assignment to the Position.)

Performs routine work of monitoring and controlling treatment processes.

Operates and adjusts equipment such as pumps, motors, belt filter presses, sludge stabilization and drying equipment, screens, thickeners and clarifiers.

Assists in the maintenance and repairs of the plant and its grounds, including but not limited to painting, cleaning and yard work - cuts and trims grass; weeding, brush removal and leave removal; shovels and plows snow.

Performs some laboratory work and associated calculations.

Keeps data in plant log and in computerized report software.

Performs emergency corrective maintenance on any and all plant equipment including troubleshooting malfunctioning equipment.

Performs routine preventive maintenance on all plant equipment.

Reads meters, gauges and thermometers; records and reports pertinent data.

Assists in the maintenance of wastewater treatment plant(s) equipment; oils, greases, waters and wipes machinery; checks motors, keeps the wastewater treatment plant clean; cleans wet wells.

Notifies superiors of unusual conditions regarding plant operations.

Wears protective equipment as directed.

Performs related duties.

REQUIRED KNOWLEDGES, SKILLS AND ABILITIES

Knowledge of all treatment plant processes and equipment. Working knowledge of electrical and mechanical equipment, including pumps, motors, meters and gauges.

Ability to perform laboratory work and to keep accurate records.

Working knowledge of safety practices associated with mechanical and electrical equipment and compliance thereof.

Ability to maintain treatment plant, facilities and equipment clean and in working conditions.

PROCESS OPERATOR-Wastewater

REQUIRED KNOWLEDGE, SKILS & ABILITIES (cont'd)

Ability to check the operation of equipment and detect flaws or defects in operation.

Ability read, understand and follow oral and written directions/materials.

Ability to establish and maintain effective working relationships with supervisors, co-workers and others.

High degree of mechanical ability.

Ability to use hand tools and motorized equipment.

MINIMUM TRAINING, EDUCATION AND EXPERIENCE REQUIRED

Graduation from an accredited high school or trade school with wastewater treatment courses and/or six (6) months of wastewater treatment plant operations experience.

SPECIAL REQUIREMENT: Possession of State of Connecticut Class II Wastewater Treatment Facility Operator's Certification or ability to obtain in a period of time not to exceed four (4) years from the date of appointment. Any requests for extension of this timeframe will be reviewed on a case by case basis.

JOB ENVIRONMENT

This position primarily works outdoors, in all types of weather, and in potentially hazardous environments, which may involve exposure to dangerous chemicals and/or raw sewage.

PHYSICAL REQUIREMENTS

The physical demands described herein are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions. While performing the duties of this job, the employee is regularly required to talk and hear. This position is very active and requires standing, walking, bending, kneeling, stooping, crouching, crawling and climbing throughout the day. The employee must frequently lift and/or move items weighing up to 60 pounds and must frequently lift, move and/or carry items weighing more than 60 pounds with assistance.

Civil Service Commission City of Milford, CT Retyped: 4/1/93 Revised: 8/2016

CITY OF MILFORD, CONNECTICUT



- Founded 1639 -70 West River Street, Milford, CT 06460 (203) 783-3239 <u>HRrecruit@milfordct.gov</u>

Human Resources Department

APPLICATION FOR EMPLOYMENT & EXAMINATION

INSTRUCTIONS FOR COMPLETION:

THIS APPLICATION FORM CONSTITUTES A PART OF THE EXAMINATION PROCESS.

Every section must be completed in full even if resume or other supporting documents are attached. You should not direct this Office to refer to a resume for information that is being asked on the application form. You must answer <u>all</u> questions completely and accurately in order for your application to be given the proper consideration.

INCOMPLETE APPLICATION WILL BE REJECTED.

- LATE APPLICATIONS WILL NOT BE ACCEPTED. Applications must be <u>received</u> in the Human Resources Department by the application deadline as stated on the job announcement. You must complete an application form in ink or typed print. You can complete an application form online at the City's website and print the application. <u>You must sign your application in ink</u> or with digital signature. Application closing dates are noted on each job announcement.
- ALL APPLICANTS SHOULD READ THE JOB ANNOUNCEMENT OF THE JOB FOR WHICH YOU ARE APPLYING. Specific job requirements will be noted under the section titled "Minimum Qualification Requirements."
- EACH SECTION IN THE APPLICATION FORM MUST BE COMPLETED. You can use additional sheets of papers to attach to your application if you need more space to provide complete information, especially as it pertains to your employment history. <u>Applications submitted without completing each section will be rejected</u>.
- **LICENSES AND CERTIFICATIONS** required for the position you are applying for must be listed and you must provide a copy of any and all licenses and certifications required, as stated on the job announcement. <u>Applications submitted without providing a copy of the required licenses/</u> certifications will be rejected.
- YOU MUST ATTACH A CLEAR COPY OF YOUR DRIVER'S LICENSE TO THE APPLICATION FORM if the job for which you are applying requires a driver's license. Applications submitted without providing a copy of your driver license will be rejected.
- YOU MUST COMPLETE EACH SECTION OF EMPLOYMENT HISTORY. You must complete "Describe Work Performed" completely. Do not write "see resume" in lieu of completing this information on the application form. <u>Applications submitted without completing</u> each line of this section will be rejected.
- **COMPLETING THE INVITATION TO SELF-IDENTIFY IS VOLUNTARY.** This information is needed to meet Federal and State reporting requirements and is also used to evaluate the effectiveness of our recruiting and testing procedures. This sheet is not seen by anyone making the hiring decision. <u>Applications will not be rejected if you choose not to complete this voluntary information section</u>.

EMPLOYMENT APPLICATION - PUBLIC WORKS

do No	T WRITE IN THIS SPACE
Πq	Rev. by:
Reasor	ו:

Human Resources Department City of Milford 70 West River Street Milford, CT 06460 (203) 783-3239

An Equal Opportunity Employer

Position applying for

Date

PLEASE TYPE OR PRINT CLEARLY IN BLACK OR BLUE INK.

Entire application must be completed in order for application to be considered.

PERSONAL INFORMATION

Last Name	First Name		M.I.		Last 6 digits of Soc. Sec. No.
Home Address	(City		State	Zip
Home Telephone	_ Mobile _		Emai	l	
Are you legally eligible for employment in the (If hired, you will be required to provide proof of elig		Yes No	Are you 18 yea	rs of age or olde	er? Yes No
Do you claim 5 points preference based on activ	ve duty in the L	US Armed Force	s?Attach copy of DD.	214 Yes	No
Do you claim 10 points veteran's disability prefe	rence?Attach c	copy of DD214 &	other supporting doc	umentation	Yes No
List any relatives currently employed with the	City: Name(s	s)		Job Title	e/Dept
Have you read the job description explaining t	he essential d	duties of the pos	sition for which you a	are applying?	Yes No
Are you able to perform the essential functions	s of the positio	on for which yo	u are applying?	Yes No	Date available to start

EDUCATION							
High School(s) attended	School(s) attended City/State			Did you gradu	late?		
					Yes	No	
						Yes	No
College/Institution attended	City/State		Did you grad	duate?	Degree/Certification	on/Credits	Major
			Yes	No			
			Yes	No			
			Yes	No			

EMPLOYMENT HISTORY

Have you ever been discharged or asked to resign from a job? Yes No If yes, please explain:

Have you previously worked for the City of Milford? Yes No If yes, dates of employment:

Position/Department:

On the next page, list ALL present and past employment in reverse chronological order BEGINNING WITH YOUR MOST RECENT EMPLOYMENT
Applicants may be required to furnish satisfactory proof of employment history. Use additional pages if necessary. Include resume with completed
application, however, resume WILL NOT substitute completion of application.

	EMPLOYM	MENT HISTORY CONTINUED		
Employer	Address		Phone	
Dates of Employment	Job title		Hours per week	
Supervisor's name/title		Reason for leaving		
Number of employees supervised (i/a)	Describe wo	rk performed below <u>DO NOT WRITE "SEE RESU</u>	ME"):	

Employer	Address		Phone	
Dates of Employment	Job title		Hours per week	
Supervisor's name/title		Reason for leaving		
Number of employees supervised (i/a)	Describe wo	ork performed below <u>DO NOT WRITE "SEE RESU</u>	<u>JME")</u> :	

Employer	Address		Phone
Dates of Employment	Job title		Hours per week
Supervisor's name/title		Reason for leaving	
Number of employees supervised (i/a)	Describe work performed below DO NOT WRITE "SEE RESUME"):		

ONLY COMPLETE THE SECTIONS BELOW IF THEY ARE RELEVANT TO THE POSITION YOU HAVE APPLIED SPECIAL SKILLS

Snowplowing: Describe any experience you may have had snow years of experience and type of area(s) plowed (roads, drivewa		include the size of the plow(s)	you have driven, number of n	nonths/
Light Equipment: What best describes your skill level with a payloader? What best describes your skill level with a backhoe? What best describes your skill level with a small tractor? Heavy Equipment: What best describes your skill level with a grader? What best describes your skill level with a Cat 225 excavator? What best describes your skill level with a bulldozer?	Excellent Excellent Excellent Excellent Excellent Excellent Excellent Excellent	 Very good Very good Good Good Good Good Good Very good Good Good Very good Good Good Good 	Fair Never Used Fair Never Used	
Please list/describe any specialized training, apprenticeship, c you are applying, such as machines you are able to operate, mentioned and any other special abilities or knowledge . Prov total number of training hours, and other details. Please also may exclude membership which would reveal gender, race, rel	languages you sp vide name and loo include any profes	eak and read or write well, c cation where training was giv ssional trade, business or civi	omputer skills besides those ven, dates attended, subject of ic activities and other offices	previously of training,
LICENSES, C	ERTIFICATIONS,	REGISTRATIONS		
f the position for which you are applying requires you to opera endorsements must be current and valid. NOTE: If applicable s from another state, you will be required as a condition of e	e, if you are offere	d employment by the City of	f Milford, and if your driver's	license
Do you have a valid driver's license? Yes No Stat	te Licens	e#	Classification	-

Expiration Date _____

Endorsements

FINALISTS WILL BE REQUIRED, UPON NOTIFICATION, TO SUBMIT A COPY OF THEIR DRIVING ABSTRACT. Note: Driving abstracts may be obtained at any Connecticut Department of Motor Vehicles office. This fee is at the finalist's expense.

PROFESSIONAL REFERENCES			
List three professional colleagues who are not your relatives or employees of The City of Milford we may contact.			
Name	Phone	Relationship	

IMPORTANT: Read each of the following sections carefully and completely. If you do not understand any portion of the statements that follow, ask for clarification. Your signature indicates that you have read and understand each of the provisions listed and that you agree to abide by the conditions stated therein.

NOTICE TO PERSONS WITH DISABILITIES: Testing arrangements to accommodate persons with disabilities will be made upon request of the applicant. If accommodation is requested, the applicant will be required to state what accommodation is needed.

PRE-EMPLOYMENT MEDICAL EXAMINATION: Applicants selected for employment will be required to pass a medical examination given by a physician designated by the City of Milford.

PROBATIONARY PERIOD: Employees serve a probationary period as determined by City policy or by any applicable collective bargaining agreement. Termination of employment during the probationary period may be with or without cause and is not subject to any appeal process or grievance procedure of any applicable collective bargaining agreement.

DRUG POLICY: It is the policy of the City of Milford to maintain a drug free workplace. Employees who are observed in possession of or using controlled substances (drugs) will be terminated and may have criminal actions filed against them. Employees in certain positions are subject to Federal laws requiring pre-employment, post-accident, and random drug testing.

UPON EMPLOYMENT, YOU WILL BE REQUIRED TO PROVIDE YOUR SOCIAL SECURITY NUMBER.

PRE-EMPLOYMENT STATEMENT

AGREEMENT: I CERTIFY THAT ALL STATEMENTS MADE ON OR IN CONNECTION WITH THIS APPLICATION ARE TRUE, ACCURATE, COMPLETE, AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT INCOMPLETE, FALSE, INACCURATE, OR MISLEADING INFORMATION GIVEN IN MY APPLICATION, INTERVIEW(S) OR DURING THE COURSE OF MY EMPLOYMENT MAY RESULT IN THE REJECTION OF THIS APPLICATION OR WITHDRAWAL OF A JOB OFFER. FURTHER, FALSE INFORMATION PROVIDED, WHETHER WILLINGLY OR ACCIDENTALLY, MAY RESULT IN DISCIPLINE OR IMMEDIATE DISMISSAL IF EMPLOYED, WHENEVER THE OMISSION OR FALSEHOOD IS DISCOVERED.

I UNDERSTAND THAT THIS APPLICATION IS NOT A CONTRACT OF EMPLOYMENT NOR IS IT A GUARANTEE OR INDICATION OF EMPLOYMENT. I ALSO UNDERSTAND THAT SHOULD I BE GRANTED AN INTERVIEW, THE REPRESENTATIONS THAT MAY BE MADE AT THE INTERVIEW ARE NOT TO BE CONSTRUED AS CREATING ANY OBLIGATION, PROMISE OR CONTRACT ON BEHALF OF THE CITY OF MILFORD. SHOULD I BE EMPLOYED BY THE CITY, IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO ABIDE BY ALL THE RULES, POLICIES AND REGULATIONS OF THE CITY OF MILFORD, AS THEY MAY FROM TIME TO TIME BE IMPLEMENTED OR REVISED. IDENTIFICATION AND VERIFICATION OF ELIGIBILITY TO WORK IN THE UNITED STATES MUST BE SATISFIED FOR EMPLOYMENT.

I FURTHER UNDERSTAND THAT IN CONSIDERATION FOR EMPLOYMENT, AN INVESTIGATIVE BACKGROUND REPORT MAY BE PREPARED AT THE REQUEST OF THE CITY OF MILFORD, WHEREBY INFORMATION MAY BE OBTAINED FROM MY EMPLOYERS (PRESENT OR FORMER), EDUCATIONAL INSTITUTIONS, ALL BRANCHES OF THE U.S. MILITARY SERVICE, AND PUBLIC RECORDS MAINTAINED BY GOVERNMENT AGENCIES OR OTHERS, INCLUDING BUT NOT LIMITED TO CRIMINAL CONVICTION REPORTS, CREDIT REPORTS, ETC. I AUTHORIZE THE CITY OF MILFORD AND ITS DESIGNATED REPRESENTATIVE(S) TO PERFORM THIS INVESTIGATION, AND FURTHER AUTHORIZE PRESENT AND FORMER EMPLOYERS, REFERENCES AND OTHER PERSONS TO PROVIDE INFORMATION FOR THE INVESTIGATION. I ALSO AUTHORIZE THE CITY OF MILFORD TO RECEIVE CRIMINAL CONVICTION RECORDS PERTAINING TO ME, WHICH MAY BE IN THE FILES OF ANY CRIMINAL JUSTICE AGENCY

I UNDERSTAND THAT ACCEPTANCE FOR EMPLOYMENT SHALL DEPEND ON SATISFACTORY REPLIES FROM MY REFERENCES AND OTHER BACKGROUND CHECKS. ANY OFFER OF EMPLOYMENT MAY BE CONTINGENT UPON PASSING A DRUG TEST AND MEDICAL EXAMINATION. I AUTHORIZE MEDICAL PROVIDER(S) TO RELEASE ANY/ALL MEDICAL INFORMATION TO THE CITY PURSUANT TO ITS PRE-EMPLOYMENT PHYSICAL AND DRUG SCREEN PROCEDURES IN ACCORDANCE WITH HIPAA.

RELEASE: I HEREBY RELEASE AND HOLD HARMLESS ANY PERSON, CORPORATION, COMPANY FROM ANY AND ALL POSSIBLE DAMAGES, DIRECT OR CONSEQUENTIAL, IMMEDIATE OR REMOTE, OF ALL FORMS OR TYPES, THAT I MAY SUSTAIN OR ALLEGE TO SUSTAIN BY VIRTUE OF THAT PERSON, CORPORATION, COMPANY OR OTHER ENTITY COMPLYING WITH MY REQUEST TO FULLY AND COMPLETELY COMPLY WITH THE INVESTIGATION, INQUIRY OR INTERESTS OF THE CITY OF MILFORD, TO WHOM I HAVE MADE AN APPLICATION OF EMPLOYMENT AND IS THE BEARER OF THIS AUTHORIZATION.

I affirm and certify that I have read all of the information above and that all answers to the questions herein are complete, true and accurate to the best of my knowledge. I understand that any misrepresentation, falsification or omission of any facts may render this application void and will be cause for disqualification, whenever discovered.

SIGNATURE APPLICANT _____

DATE



City of Milford

INVITATION TO SELF-IDENTIFY

Position applying for (use the title that appears on the job announcement)

SECTION 1: CANDIDATE INFORMATION

It is the policy of the City of Milford to recruit, hire, and promote qualified people in all job classifications regardless of age, race, gender, color, religion, creed, national origin, marital or veteran status, sexual orientation, gender identity or expression, disability or any other legally protected status, unless they are bona-fide occupational qualifications.

The following information is needed for compliance with governmental reporting requirements. While completion of this section is voluntary, all applicants are strongly urged to complete this as part of the pre-employment process. Applicants so choosing, may identify on the form that they have chosen not to provide the City of Milford with the requested information by checking the appropriate box in Section 4. This information will not affect in any way your employment opportunities. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable federal laws, executive orders, and regulations, including those which require the information to be summarized and reported to the Federal Government for civil rights enforcement purposes.

SECTION 2: GENERAL	INFORMATION		
Name		Date	
Social Security Number	000 (Last six digits ONLY)		
SECTION 3: STATISTIC	CAL INFORMATI	ON	
		PLEASE ANSWER THE FOLLOWING QUESTION:	
What is your race/ethn American Indian or Alaska Native Asian Black or African American Hispanic or Latino Native Hawaiian or Other Pacific Islander White Two or more races	Race/Ethni (Not Hispanic who maintains triba (Not Hispanic including, for exam (Not Hispanic All persons o (Not Hispanic (Not Hispanic	ark the <u>ONE BOX</u> that describes the race/ethnicity category with which you primarily identify.) ic Identification c or Latino) All persons having origins in any of the original peoples of North and South America (including Central America), and al affiliation or community attachment. c or Latino) All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent ple, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Phillipine Islands, Thailand, and Vietnam. c or Latino) All persons having origins in any of the black racial groups of Africa. f Cuban, Mexican, Puerto Rican, Central or South America, or other Spanish culture or origin, regardless of race. c or Latino) All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands. nic or Latino origin.) All persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.	
Gender Male	Female		
SECTION 4: NON-PAR		Please check box if applicable	
SECTION 5: RECRUITI			
How did you hear about thi	s job? (Please cheo		
Milford Mirror City Employee			
Other newspaper (give	name):	Human Resources or Department Bulletin Board	
City Website		Community Agency (give name):	
Internet (list site):		Professional Journal (give name):	
State of CT job site		Other (please specify):	



CITY OF MILFORD

PROCESS OPERATOR – WASTEWATER DIVISION PUBLIC WORKS DEPARTMENT

APPLICATION SUPPLEMENT #24-38

NAME

SOCIAL SECURITY NUMBER 000 - _____ - ____ (Last six digits only)

For this examination, you will be filling out specific information about your training and experience. The information that you give will be used to find out how well your background qualifies you for this position. You <u>must</u> fill out this examination booklet completely in order to take part in this examination. <u>THIS BOOKLET IS AN</u> **EXAMINATION**.

On the pages that follow, you will be asked to supply factual information about your training, and the duties, responsibilities and accomplishments that are associated with the jobs which helped you qualify for the position for which you are applying. Your training and experience will be scored according to how closely they relate to the various job components or factors of the position of Process Operator. Your score will be based only on what you include in this examination. Incomplete or illegible applications/supplements will be rejected.

This examination booklet and a completed Application for Employment must be received by the Human Resources Department by the last filing date noted in the job announcement. Information received after the last filing date <u>will not</u> be considered.

PRELIMINARY REVIEW OF QUALIFICATIONS

I. GENERAL EXPERIENCE AND LICENSURE:

PART A. – EXPERIENCE

Do you have at least six (6) months of wastewater treatment plant operations experience?

No _____ Yes ____ If Yes, Number of Years/Months Experience _____

Indicate the type of work experience. Check (\checkmark) all that are applicable:

_____ performing routine work of monitoring and controlling treatment processes: _____

_____ operating and adjusting equipment such as pumps, motors, belt filter presses, sludge stabilization and drying equipment, screens, thickeners and clarifiers: _____

_____ performing laboratory work and calculations: _____

PART B. – LICENSURE

Do you possess a State of Connecticut Class II Wastewater Treatment Facility Operator's Certification?

_____Yes (Must attach a copy of license.)

____No

II. <u>EXPERIENCE</u>

Please follow column headings completely. Use whatever terms would be most indicative of the level and scope of your responsibilities. You may use additional pages, if necessary.

A. Describe in detail your work experience as it pertains to the duties of process operator.

Dates & No. of Hours/Week	
Name of Employer:	Performing This Job:
Supervisor's Name:	Supervisor's Title:
Your Job Title & Duties:	

B. Do you have the ability to (check all that apply):

_____ stand, walk, bend, kneel, stoop, crouch, crawl and climb throughout the day?

_____ frequently lift and/or move items weighing up to 60 pounds with or without assistance?

_____ work outdoors in all types of weather and in potentially hazardous environments, which may involve exposure to dangerous chemicals and/or raw sewage?

PART III. – TRAINING

List all training (seminars, special courses, advanced training, specialized training, etc.) that you have attended/completed within the past five (5) years, relevant to wastewater treatment processes.

	SPONSORING	DATES ATTENDED
AREA OF STUDY/TITLE OF COURSE	ORGANIZATION	& NO. OF HOURS