

POSITION AVAILABLE

Wastewater Supervisor

The City of Stewartville is a progressively growing community with a population of 6,850. We are currently seeking applicants for the position of Wastewater Supervisor to run our classified B Major plant.

Job Description: Performs first-level supervisory work with primary responsibility to run the wastewater treatment plant. Assists the Public Works Director on administrative matters. Performs same tasks as subordinate positions. Ability to cross train on water system. Takes charge of the department as delegated by the Director. (This position has authority to assign, prioritize, and direct the work of subordinate employees. The incumbent also is responsible for training and coaching employees and may engage in initial disciplinary measures).

Substantial experience (at least 5 years) in wastewater field contributing to sufficient knowledge of procedures and techniques used in the maintenance and repair of municipal infra-and superstructure. Minnesota Class B commercial driver's license with tanker & air brakes endorsement and Bio-solids Applicator License is required.

Salary w/Class C Wastewater License: Pay Grade 13 – Range/\$58,815 - \$75,527 and the ability to obtain Class B within 12 months.

Salary w/Class B Wastewater License: Pay Grade 14 – Range/\$66,811 - \$86,854 and the ability to obtain Class A within 12 months

Salary w/Class A Wastewater License: Pay Grade 15 – Range \$73,497 - \$95,547.

Applicants can obtain an application at City Hall or from our website www.stewartvillemn.com under Employment Opportunities.

This position is open until filled. Please submit your application to City of Stewartville, 105 E 1st St., Stewartville or email to City Clerk, Cheryl Roeder – croeder@stewartvillemn.com .

Cheryl Roeder
City Clerk



www.stewartvillemn.com

We welcome you as an applicant for employment with the City of Stewartville, MN. Your application will be considered with others in competition for the position in which you are interested. It is the policy and intent of the City of Stewartville to provide equal opportunity employment to all persons. This policy prohibits discrimination because of race, color, sex, national origin, political affiliation, place of residence, marital status, sexual preference, status with regard to public assistance or disability, as is consistent with the City's policy of hiring a well-qualified person so as to maintain the high standards of public service required of all City employees. This policy applies to all phases of permanent and part-time employment by the City of Stewartville. Please furnish with us complete information as outlined in this application. You are encouraged to attach any additional information or materials, which you believe qualify you for the position for which you are applying.

GENERAL INFORMATION

Position: Wastewater Supervisor

Date Available to Start: _____

Last Name:	First Name:		MI	
Street Address:	City	State	Zip:	Cell No.

E-MAIL ADDRESS: _____

Are you under 18 years of age? Yes ____ No ____

Are you willing to work overtime if required: Yes ____ No ____

Are you a United States Citizen? Yes ____ No ____

Education /Training

High School Graduate: _____ GED: _____ College: _____

School Name & Address	Diploma, Degree, Certificate of Credits Earned	Major
High School/GED		
College or University		
Graduate School		
Technical		

List any correspondence courses, special courses, seminars, workshops, and/or training programs you have attended, or registrations, licenses, or certificates you have that might relate to this position.
Please review the job description before responding.

Driver's License Information

Do you have a valid driver's license? Yes_____ No_____

Driver's License No: _____

State of Issuance: _____ Class: _____ Expiration: _____

Have you had any moving violations in the last five (5) years? Yes No

If yes, please explain: _____

**** Please provide a copy of your driver's license!**

Computer Experience

List any computer software you can operate proficiently:

Labor and Skilled Trade Positions Only

Apprenticeship(s): _____

List all machines and equipment that you have experience operating: _____

Employment History

Experience and training rating are determined by this information. Please be complete. List most recent employers first. (Use additional sheets if necessary).

Present or Last Employer:			
Address:		City	State Zip
Supervisor Title & Name		Phone # ()	May we Contact? Yes No
Dates of Employment	Hours Works/Week	Job Title	Last Salary or Hourly Wage
Reason for Leaving:			
Specific Duties:			

Present or Last Employer:			
Address:		City	State Zip
Supervisor Title & Name		Phone # ()	May we Contact? Yes No
Dates of Employment	Hours Works/Week	Job Title	Last Salary or Hourly Wage
Reason for Leaving:			
Specific Duties:			

Present or Last Employer:			
Address:		City	State Zip
Supervisor Title & Name		Phone # ()	May we Contact? Yes No
Dates of Employment	Hours Works/Week	Job Title	Last Salary or Hourly Wage
Reason for Leaving:			
Specific Duties:			

Supervision

Have you ever supervised people? Yes ____ No ____

Company Name(s) _____

Check the functions you have performed as a supervisor:

____ Interviewed Candidates ____ Conducted Performance Evaluations ____ Disciplined Employees
____ Hired/Recommended for Hire ____ Recommended Salary Adjustments ____ Terminated Employees
____ Established Objectives

Military Experience

Complete this section only if you served in the U.S. Armed Forces.

Describe your duties and any special training:	Branch of Service	Period of Active Duty From To
	Rank at Discharge	Type of Discharge
	Date of Final Discharge	

Volunteer/Unsalariated Experience

Volunteer Organization		Position Held	
Street	City	State	Zip
Immediate Supervisor		Phone No. ()	
Dates of Participation		Hours Per Week	
Skills Learned			

Volunteer Organization		Position Held	
Street	City	State	Zip
Immediate Supervisor		Phone No. ()	
Dates of Participation		Hours Per Week	
Skills Learned			

Accommodations

Do you have any physical or health limitations that would require special or reasonable accommodations by the City: Yes____ No ____

If yes, please describe the nature of the accommodation: _____

Employment of Relatives

List any relatives currently employed by the City of Stewartville

Name	Relationship to You
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Personal References (Not former employees or relatives)

Name & Occupation	Email Address	Phone Number

**GENERAL AUTHORIZATION AND RELEASE
PURSUANT TO MINNESOTA STATUTES 13.05, SUBD. 4,
MINNESOTA DATA PRACTICES ACT**

TENNENSEN WARNING

I. Personnel Data

MN Stat. 13.43 classifies all personnel data. This section has a fundamental difference from other statutes in the Act. Under section 13.43, all personnel data is considered private data on individuals, unless there is a classification that makes the data public.

Section 34.43 provides that the following data on current and former employees is public: name; actual gross salary; salary range, contract fees; actual gross pensions, the value and nature of employer paid fringe benefits; the basis for any added remuneration; job title; job description; education and training background; previous work experience; date of first and last employment; existence and status of any complaints for charges against the employee; the final disposition of any disciplinary action together with the specific reasons and data documenting the basis of the action; the terms of any agreement settling a dispute arising out of the employment relationship; work location; work telephone number; badge number; honors and awards; and payroll time sheets.

Personnel data which is not public is classified as private. Private personnel data is not accessible to the public, but is accessible to the individual subject of the data. Minn. Stat. 13.02, Subd. 12.

An employee's home address, spouse/dependent names, and individual medical history are private personnel data. MN Stat. 13.43, Subd. 4,

1. Social Security Numbers

An employee's social security number is private personnel data. MN Stat. 13.49, Subd. 1. Social security numbers of an employee's spouse and dependents are also private.

In addition, there are federal laws pertaining to social security numbers. No federal, state or local government entity can lawfully deny an individual any right, benefit, or privilege provided by law if the individual refuses to disclose her/his social security number, unless the collection is for the administration of any tax, general public assistance, or driver's license or motor vehicle registration. When asked to provide her/his social security number, an individual must be informed of the uses to which the number will be put, and whether the disclosure is voluntary or mandatory. Public law 93-597, Section 7; 42 U.S.C. 405(2)(c)(I) and (iii).

II. Collection of Private and Confidential Personnel Data

An employee asked to supply private or confidential data must be informed of the reason for collecting such data and the intended use of the data. MN Stat. 13.04, Subd. 2.

The purpose of this notice - called a Tennessen Warning - is to enable the individual to make an informed decision as to whether she/he wishes to provide the requested information to the government entity. It essentially serves as a privacy protection, whereby the individual may protect

her/his privacy by deciding not to provide the data to the government. MN Dept. of Admin., Advisory Opinion 98-003.

An employer may still require an employee to provide private information as a condition of employment or of receiving certain benefits. The law is established only to guarantee informed choice, not to eliminate an employer's right to collect private or confidential information.

A. Tennesen Warning

An individual asked to supply private or confidential data concerning the individual shall be informed of (a) the purpose and intended use of the requested data within the ... political subdivision...; (b) whether the individual may refuse or is legally required to supply the requested data; (c) any known consequences arising from supplying or refusing to supply private or confidential data; and (d) the identity of other person or entities authorized by state or federal law to receive the data. MN Stat. 13.04, Subd. 2.

By copy of this notice I have been advised of my right to refuse to provide certain confidential information and acknowledge receipt of the Tension Warning.

Signature

Date

VETERAN'S PREFERENCE

The Minnesota Veteran's Preference Act grants veterans a limited preference over non-veterans in hiring and promotion of public employment.

To qualify for preference, you must have served on active duty in any branch of the Armed Forces of the United States for 181 consecutive days or more and have been honorably discharged; you must be a citizen of the United States and currently not receiving a monthly veteran's pension based exclusively on length of service; or be the spouse of a deceased veteran or of a disabled veteran who because of disability is unable to qualify.

The City operates under a point preference system which awards points to qualified veterans and spouses of deceased or disabled veterans. Five (5) preference points are granted for non-disabled veterans and spouses of deceased or disabled veterans at the initial selection phase or at the time of an open competitive examination, whichever is applicable. Ten (10) points are added if the veteran has a permanent service-connected compensable disability as certified by the Veteran's Administration. For promotional opportunities, five(5) points are granted to disabled veterans only (50% disability required) and these points apply only to the first promotion after securing City employment.

Please Print

Name: _____

Do you wish to claim a Veteran's Preference? ☐ Yes ☐ No

If yes, please check the preference you are claiming:

☐ **Veteran** (defined as a person separated under honorable conditions who has served on active duty for a least 181 days or honorably discharged by reason of disability incurred while on active duty).

☐ **Disabled Veteran** (a Veteran having a compensable service-connected disability as adjudicated by the U.S. Veterans Administration or the retirement board of one of the branches of the Armed Forces, and which is currently existing).

☐ **Spouse of deceased veterans**

☐ **Spouse of a disabled veteran**, who is unable to use preference due to disability.

You must also submit a copy of your DD214 or any other military document that can substantiate the service information requested on the form. **Claim not accompanied by proper documentation will not be processed.** Note: This claim will be separated from your application during the recruitment process.

Signature: _____ Date: _____