



CITY OF STAMFORD

AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER

The City of Stamford is an equal opportunity/affirmative action employer and strongly encourages the applications of women, minorities and persons with disabilities

OPEN COMPETITIVE EXAMINATION NO. 13-25 COLLECTIONS SYSTEMS SUPERVISOR - WPCA

Annual Salary Range: \$74,805 – \$96,237

DUTIES: Under the general direction of the Water Pollution Control Bureau Chief or designee, develops, implements and supervises the capacity, management, operation and maintenance (CMOM) program for the sanitary sewer collection/conveyance and pump station systems. Manages the fats, oil and grease (FOG) Program; does related work as required.

MINIMUM QUALIFICATION REQUIREMENTS: Graduation from an accredited college or university with a Bachelor's degree in a natural science and four (4) years of applied field experience involving regulatory compliance or sanitary sewer activities including implementing preventative maintenance and/or environmental compliance programs, of which two (2) years must have been in a government setting and a supervisor capacity or equivalent education, training and experience. Related experience must have been acquired within the past ten (10) years.

SPECIAL REQUIREMENTS: At time of application, possession of a valid motor vehicle operator's license.

SCOPE OF EXAMINATION: There will not be a written examination. Applicants will be ranked according to their education, training and experience. Applicants are advised to fully complete the application form and supplement, listing all related training and work experience. Incomplete applications or supplements will be rejected.

FILING REQUIREMENTS: A completed City of Stamford Employment Application and Application Supplement "13-25" must be submitted by **Friday, December 20, 2013**. Applications can be obtained at the City of Stamford, Human Resources Division, 9th Floor, and 888 Washington Boulevard, Stamford, Connecticut or at www.cityofstamford.org.

Please note: Only properly completed and submitted application and application supplement will be considered. Applications of candidates who do not meet the stated position requirements will not be considered.

The Human Resources Department provides reasonable accommodation to persons with disabilities in accordance with the Americans with Disabilities Act (ADA) and the Americans with Disabilities Act Amendment Act (ADAAA). If you need an accommodation in the application or testing process, please contact the Human Resources Division.

Re-issued: 11/15/2013

EMPLOYEE BENEFITS:

- Health plan and Hospitalization
- Paid Vacations and Holidays
- Retirement Plan
- Group Life Insurance
- Sick Leave

Applications are obtained and submitted to:

DEPARTMENT OF HUMAN RESOURCES
City of Stamford
888 WASHINGTON BOULEVARD
STAMFORD, CT 06904
TELEPHONE (203)977-4070
www.cityofstamford.org

CHANGE OF ADDRESS

It is your responsibility to notify the Department of Human Resources of any change of Address on your application

COLLECTIONS SYSTEMS SUPERVISOR - WPCA
APPLICATION SUPPLEMENT #13-25
FACTORED EXPERIENCE AND TRAINING EXAMINATION

NAME _____

SOCIAL SECURITY NUMER (Last six digits) 000 - -

For this examination, you will be filling out specific information about your education, training and experience. The information, which you give, will be used to determine out how well your background qualifies you for this position. You **MUST** fill out this supplement completely in order to be considered for this position. **THIS SUPPLEMENT IS AN EXAMINATION.**

Your training and experience will be scored according to how closely they relate to the various job components or factors of the position of *Collections Systems Supervisor - WPCA*. Your score will be based only on what you include in this supplement. Incomplete or illegible applications/supplements will be rejected.

This supplement and a completed "Application for Examination or Employment" must be filed with the Human Resources Division by the last filing date noted in the job announcement no later than December 20, 2013. Information submitted after the last filing date will not be considered.

AN EOE/AA EMPLOYER

MAINTENANCE AND CONSTRUCTION SUPERVISOR – WPCA

MINIMUM QUALIFICATIONS

Please note that applicants who do not meet the minimum qualifications for *Maintenance and Construction Supervisor - WPCA* will be disqualified. Applicants are urged to carefully review the requirements before filing an application.

A. EDUCATION:

Do you possess a Bachelor’s Degree in physical or environmental science?

Yes _____ No _____

B. EXPERIENCE:

1. Do you possess at least four (4) years of applied field experience involving regulatory compliance or sanitary sewer activities including implementing preventative maintenance and/or environmental compliance programs of which two (2) years have been in a government setting?

Yes _____ No _____

2. Were at least two (2) of the above years in a supervisory capacity in a municipality or other government setting?

Yes _____ No _____

C. LICENSURE: Do you possess a valid motor vehicle operator’s license?

Yes _____ (Attach copy) No _____

If you did not answer yes to all questions, your application will not be considered

PART I. SUMMARY OF EDUCATION AND EXPERIENCE #13-25

A. EDUCATION:

1. Degree: Specify the major field of study for which the degree was conferred.

Associate's Yes___ (Major)_____ No___

Bachelor's Yes___ (Major)_____ No___

Master's Yes___ (Major)_____ No___

2. Credits: If you did not obtain a college degree but did complete college course work, list number of credits earned. _____

Name of college or university attended_____

B. EXPERIENCE:

1. State the length of your work experience involving regulatory compliance or sanitary sewer activities including implementing preventative maintenance and/or environmental compliance programs of which two (2) years have been in a government setting

Yes___ No___ # of Years_____

2. Regarding the experience you referenced above, check below to indicate the time period(s) in which you held positions in which that experience was gained.

Between 2003 and current date: _____

During 2003 and/or earlier: _____

3. State the length of your work experience in a supervisory capacity in a municipality or other government setting.

Municipality Yes_____ No_____ # of Years_____

Other Gov't Setting Yes_____ No_____ # of Years_____

PART II. EXPERIENCE: #13-25

For Part I, please follow column headings completely. Use whatever terms would be most indicative of the level and scope of your responsibilities. You may make copies of this page if more than one page is necessary to describe your work experience. You may list the same job(s) in one or more sections, if applicable.

- A. Describe your work experience as a supervisor involving regulatory compliance or sanitary sewer activities including implementing preventative maintenance and/or environmental compliance program. Include number and title of employee(s) supervised in your description of duties.

DATES & NO. HRS. / WEEK	IDENTIFY EMPLOYER AND TITLE OF SUPERVISOR	YOUR JOB TITLE & DUTIES

PART II. EXPERIENCE: (cont'd) #13-25

B. Describe your non-supervisory experience involving regulatory compliance or sanitary sewer activities including implementing preventative maintenance and/or environmental compliance program.

DATES & NO. HRS. / WEEK	IDENTIFY EMPLOYER AND TITLE OF SUPERVISOR	YOUR JOB TITLE & DUTIES

PART III. #13-25

SPECIALIZED TRAINING: List all specialized training (seminars, special courses, advanced training, etc.) that you have successfully completed within the past five years pertaining to construction, maintenance and/or design practices, procedures and techniques.

SPECIALIZED TRAINING TITLE OF COURSE	SPONSORING ORGANIZATION	DATES ATTENDED & NO. OF HOURS

On the following pages are a variety of statements that are related to this position. For each of those statements, circle the letter for the level described below which best reflects your experience, education or training as it relates to that item.

- A - I have applied this Knowledge, Skill or Ability in an actual setting while performing a job.
- B - I have education or training relevant to this Knowledge, Skill or Ability, but have not applied it in an actual job.
- C - I have little or no experience, education or training relevant to this Knowledge, Skill or Ability.

For each A or B answer, give evidence, in detail, in the space provided of how you acquired the Knowledge, Skill or Ability listed. Evidence may be stated in terms of education/training (list courses and schools) or in terms of experience (list your job duties that apply, name of employer, and dates of work).

A. Knowledge of capacity, management, operation and maintenance (CMOM) program.

Circle the Appropriate Letter

A B C

Employer/School: _____

Dates: _____

Details: _____

B. Knowledge of sewer collection/conveyance and pump stations.

Circle the Appropriate Letter

A B C

Employer/School: _____

Dates: _____

Details: _____

- C. Knowledge of applicable municipal laws, ordinances and regulations related to the sanitary sewer and pump station systems.

Circle the Appropriate Letter

A B C

Employer/School

Dates:

Details:

- D. Knowledge of Federal and State regulations and permits related to wastewater collection systems and pump stations.

Circle the Appropriate Letter

A B C

Employer/School

Dates:

Details:

E. Knowledge of preventative maintenance procedures and techniques.

Circle the Appropriate Letter

A B C

Employer/School

Dates:

Details:

F. Ability to read, analyze and interpret sewer related maps, drawings and documents.

Circle the Appropriate Letter

A B C

Employer/School

Dates:

Details:

PART IV. KNOWLEDGE, SKILLS AND ABILITIES STATEMENT

(cont'd) #13-25

- G. Ability to fully utilize computer software applications and to create and maintain a computerized system for data, records and reports.

Circle the Appropriate Letter

A B C

Employer/School:

Dates:

Give Examples:

- H. Ability to plan, assign and supervise the work of subordinates and to instruct them in proper, safe work methods and procedures.

Circle the Appropriate Letter

A B C

Employer/School

Dates:

Details:



APPLICATION FOR EXAMINATION OR EMPLOYMENT

The City of Stamford
Human Resources Division
888 Washington Boulevard
P.O. Box 10152
Stamford, CT 06904-2152
Tel. (203) 977-4070

AN EQUAL OPPORTUNITY EMPLOYER

Position applying for
Use Title on Job Announcement

Exam Number

DO NOT WRITE IN THIS SPACE

Q Rev. by: _____

NQ _____

Educ _____

Exp _____

Not City EE _____

Other _____

PLEASE TYPE OR PRINT CLEARLY IN BLACK INK.
All blanks must be completed in order for application to be considered.

GENERAL INFORMATION

Name _____
(Last) (First) (Middle)

Address _____
(Street/Apt. #) (City) (State) (Zip Code)

Home Telephone _____ Work Telephone _____
(Area Code) (Area Code)

Cellular Telephone _____ E-mail Address _____
(Area Code)

Social Security Number _____ 000 _____ Best daytime contact: Home Work Cell
(Last six digits ONLY)

Do you claim 5 points preference based on active duty in the U. S. Armed Forces? Yes No
(Attach copy of DD214)

Do you claim 10 points veteran's disability preference? Yes No
(Attach DD214 and supporting documentation)

Have you ever worked for the City of Stamford before? Yes No
If yes, list by dates employed and job title(s): _____

Are you currently authorized to work in the United States? Yes No
Note: 1986 Immigration Reform & Control Act requires verification of identity and employment eligibility at the time of hire.

1. Have you ever been convicted of any offense other than juvenile, youthful offender, or a minor traffic violation? Yes No
If yes, you must complete Section B of the applicant disclosure form.

2. Have you ever been disqualified for a position with the City of Stamford due to a criminal conviction or failure to fully disclose a criminal conviction? Yes No
If yes, list job title and date of disqualification. _____

(Provide information regarding ACTUAL convictions only. Any arrest, charge, conviction and/or record which has been erased, dismissed, nulled or pardoned pursuant to the CGS § 31-51i, should NOT be disclosed. Disclosure of a criminal record will not necessarily disqualify you for employment. Each conviction will be evaluated on its own merits with respect to time, circumstances and seriousness, in relation to the job for which you are applying.)

RECORD OF EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL AND CITY/STATE	DATES ATTENDED	COURSE OF STUDY (Major/Minor)	GRADUATED (Yes/No)	DEGREE, DIPLOMA, G.E.D., AND CERTIFICATE OR CREDITS COMPLETED
HIGH SCHOOL					
COLLEGE OR UNIVERSITY					
COLLEGE OR UNIVERSITY					
COLLEGE OR UNIVERSITY					

Other Training/Certifications (special courses, work training programs, armed forces training) related to the job for which you are applying. Give name and location where training was given, dates attended, subject of training, number of hours weekly, and other details.

Summarize any other Special Skills or Abilities relating to the job you want, such as: licenses, machines you operate, languages which you speak, read and write well, computer skills, and any other special abilities or knowledges.

EMPLOYMENT HISTORY

List below **ALL** present and past employment. **BEGIN WITH YOUR MOST RECENT EMPLOYMENT AND WORK BACKWARDS CONSECUTIVELY.** Applicants may be required to furnish satisfactory proof of employment history claimed. Use additional pages if necessary. Resumes may be included with a **completed application.**

1. Name and Address of Employer _____	Employed From _____ # of hours _____ per week _____	To _____ _____ _____	Ending Salary _____
Supervisor Name, Title, Telephone _____			
Your Title _____			
Describe your duties: _____			

Reason for leaving _____			

EMPLOYMENT HISTORY (Continued)

2. Name and Address of Employer _____ Employed From _____ To _____
of hours _____
per week _____ Last Salary _____
Supervisor Name, Title, Telephone _____
Your Title _____
Describe your duties: _____

Reason for leaving _____

3. Name and Address of Employer _____ Employed From _____ To _____
of hours _____
per week _____ Ending Salary _____
Supervisor Name, Title, Telephone _____
Your Title _____
Describe your duties: _____

Reason for leaving _____

4. Name and Address of Employer _____ Employed From _____ To _____
of hours _____
per week _____ Ending Salary _____
Supervisor Name, Title, Telephone _____
Your Title _____
Describe your duties: _____

Reason for leaving _____

5. Name and Address of Employer _____ Employed From _____ To _____
of hours _____
per week _____ Ending Salary _____
Supervisor Name, Title, Telephone _____
Your Title _____
Describe your duties: _____

Reason for leaving _____

Do you have any objections to the Human Resources Division verifying your work experience and/or educational qualifications?

I hereby authorize the City of Stamford to verify my work experience and/or educational qualifications.

(A) Your former employer? Yes No

(B) Your present employer? Yes No

If answer is "Yes" to either (A) or (B) explain under comments section

Applicant's Signature

COMMENTS

MILITARY INFORMATION

Veteran of U.S. Armed Forces	Service Branch	Date Discharged	Type of Discharge	Final Rank
<input type="checkbox"/> Yes				
<input type="checkbox"/> No				

PRE-EMPLOYMENT STATEMENT (Read Carefully)

I certify that all statements made on or in connection with this application are true, 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; withdrawal of a job offer; or discipline, up to and including termination of employment. Further, false information provided, whether willingly or accidental, may result in my 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. Should I be employed by the City, in consideration of my employment, I agree to conform to the rules and policies of the City of Stamford, 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 Stamford by an independent party, 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 Stamford 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 Stamford 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. In the event I receive a job offer, I also understand that I will be subject to a drug test and medical examination that I must pass before I commence work.

I have read, understood, and agree to the foregoing.

Applicant's Signature _____

Date _____



City of Stamford

Applicant Disclosure Form

Section A

1. CANDIDATE INFORMATION

It is the policy of the City of Stamford to recruit, hire, and promote qualified people in all job classifications regardless of age, race, sex, color, religion, national origin, marital status, veteran status or disability 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, we strongly urge that all applicants 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 Stamford with the requested information by checking the appropriate box in section four. This information will not affect in any way your employment opportunities. This form will be removed from the application.

2. GENERAL INFORMATION

Your Name _____ Date _____

Social Security Number _____ 000 _____ (Last six digits ONLY)

3. STATISTICAL INFORMATION

Race/Ethnic Identification (Please check one)

American Indian or Alaska Native All persons having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian All persons 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, and Vietnam.

Black or African American (Not of Hispanic or Latino origin) All persons having origins in any of the black racial groups of Africa.

Hispanic or Latino All persons of Cuban, Mexican, Puerto Rican, Central or South America, or other Spanish culture or origin, regardless of race.

Native Hawaiian or Other Pacific Islander All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands.

White (Not of Hispanic or Latino origin) All persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Other Please specify _____

Job Classification

Please write the title of the position for which you are applying in the box above, using the title on Job Announcement.

Gender

Female

Male

4. NON-PARTICIPATION

I have read the above statement and have chosen not to complete this form. Please check box if applicable

5. RECRUITING INFORMATION

How did you hear about this job? (Please check one)

Stamford Advocate Human Resources Division Bulletin Board

Other newspaper. Please give name: _____ Community Agency Please give name: _____

City Website Professional journal Please give name: _____

Internet Please give site: _____ Other. Please specify: _____

City Employee



City of Stamford

Applicant Disclosure Form

Section B

NOTE:
THIS INFORMATION WILL BE REVIEWED ONLY BY
MEMBERS OF THE HUMAN RESOURCES DIVISION AND
HIRING MANAGERS.

CRIMINAL CONVICTION INFORMATION

Applicants are required to disclose the existence of *any* criminal conviction, regardless of the nature, date or location thereof, with the exception of minor traffic violations or an arrest, criminal charge, or conviction that has been erased. The types of records subject to erasure under Connecticut law are as follows: (a) a finding of delinquency or that a child was a member of a family with service needs; (b) a sentence as a youthful offender; (c) a criminal charge that was dismissed or "nolled"; (d) a criminal charge for which the person was found not guilty; and (e) a conviction for which the person received an absolute pardon.

The information provided below is subject to the terms of the "Pre-Employment Statement" on Page 4 of this application. A criminal conviction will not necessarily result in the rejection of this application, but will be considered as it relates to the nature of the position sought, and in light of any applicable state and federal law.

Name (Print)

Title of Position Sought

Applicant's Signature

Date

DATE OF CONVICTION	OFFENSE	DATE OF ARREST	PLACE OF ARREST (City/State)	SENTENCE