

III. WORK EXPERIENCE HISTORY

List your present employment first then any additional employment. Give a **detailed** description of your collection system work experience as designated below. If you are not a full-time Collection Systems Operator, specify the average number of hours per week that are spent in the actual operation and maintenance of the collection system. **NOTE: If you are applying for a Class III or IV examination, clearly define AND document your "in-charge" experience and qualifications (supervision does not necessarily dictate "in-charge" experience).**

CURRENT EMPLOYMENT:							
Current Employer:	_____			Dates – From	____/____/____	to	Present
Job Title:	_____			Number of Persons Supervised:	_____		
Job Description:	_____						

Collection System Duties:	_____						

Classification of Wastewater Treatment Plant:	Municipal -	I	II	III	IV	(Circle One)	
	Industrial -	I-SP	A-SO	A	B	C	D
Wastewater Treatment Plant Capacity:	_____ Gallons Per Day (gpd)						
Supervisor's Name:	_____						
Address:	_____						
Phone No.:	() _____						

PRIOR EMPLOYMENT:							
Past Employer:	_____			Dates – From	____/____/____	to	____/____/____
Job Title:	_____			Number of Persons Supervised:	_____		
Job Description:	_____						

Collection System Duties:	_____						

Classification of Wastewater Treatment Plant:	Municipal -	I	II	III	IV	(Circle One)	
	Industrial -	I-SP	A-SO	A	B	C	D
Wastewater Treatment Plant Capacity:	_____ Gallons Per Day (gpd)						
Supervisor's Name:	_____						
Address:	_____						
Phone No.:	() _____						

IV. ADDITIONAL EDUCATION (Attach Copy of Completion Verification and/or Transcripts)

1. NAME/DESCRIPTION OF COURSE: _____

(Location) (Dates) (College Units or Class Hours)
2. NAME/DESCRIPTION OF COURSE: _____

(Location) (Dates) (College Units or Class Hours)
3. NAME/DESCRIPTION OF COURSE: _____

(Location) (Dates) (College Units or Class Hours)
4. NAME/DESCRIPTION OF COURSE: _____

(Location) (Dates) (College Units or Class Hours)

V. SUPERVISOR'S VERIFICATION OF CURRENT EMPLOYMENT (to be completed by present Employer)

I hereby verify that the information contained in the current employment section of the application made by _____
_____ to be true and correct to the best of my knowledge and belief.

Supervisor's Signature _____ Date

Printed _____ Title

VI. SIGNATURE OF APPLICANT

I, the undersigned, certify that I am the above applicant; that all statements made and information contained in this application are true to the best of my knowledge and belief; that I understand that any omissions or misrepresentations may result in ineligibility for the examination applied for. I also consent to a thorough investigation of my employment record and other qualifications in related activities for the purpose of verification of my qualifications for the certificate for which I have applied.

(Signature of Applicant) / / (Date)

Completed application form with check/money order for proper amount, and payable to IWEA, should be returned to:

IWEA
8909 Purdue Road, Suite 130
Indianapolis, IN 46268