JOB DESCRIPTION

Classification: **LABORATORY TECHNICIAN III - WASTEWATER PLANT**

RANGE: **55-65 ($23-$30 Per Hr)**

Job Summary

Under the general supervision of the wastewater treatment plant Director. Conducts all the sampling program and chemical and bacteriological analysis for the city's wastewater treatment facilities as required by state and federal regulatory agencies.

Job Duties

Performs bacteriological analysis pertaining to wastewater treatment, tests for inorganic elements, performs biochemical oxygen demand analysis, dissolved oxygen analysis, as well as analysis on volatile solids, suspended solids, and other regular tests required for proper monitoring of a wastewater treatment facility.

Maintains all the necessary records on data provided by laboratory instruments and on data collected from the different wastewater process units and for plant performance evaluation and reporting requirements.

Responsible for the appearance and cleanliness of the laboratory and laboratory glassware, for the proper maintenance of laboratory equipment and for maintaining laboratory chemical inventory.

Assists plant Director with other laboratory record keeping responsibility and in the preparation of plant activity reports.

Assists other plant personnel in the operation of the wastewater treatment plant as required.

Qualifications

Graduation from a standard senior or vocational high school, preferably supplemented by college level course work in chemistry and three (3) years of increasingly responsible chemical laboratory experience at a wastewater treatment facility requiring bacteriological analysis.

Certification by the State of New Mexico as Wastewater operator III.

Ability to conduct laboratory analysis safely and efficiently and to keep accurate and legible records.

Must be familiar with the theory and operation of Wastewater Treatment activated sludge process and process control, with water system theory and operation and with proper random sampling techniques.

Ability to establish and maintain effective working relationships with fellow employees.

Possession of a valid New Mexico Drivers License.

Date Approved:_____

Attest: _____ Mayor:_____

APPLICATION FOR EMPLOYMENT

CITY OF SOCORRO
111 School of Mines, P.O. Drawer K
Socorro, NM 87801-0329
(575) 835-0240

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

(PLEASE PRINT)

Position (s) Applied For	Date of Application
How Did You Learn About Us? ☐ Advertisement ☐ Friend ☐ Inquiry ☐ Employment Agency ☐ Relative ☐ Other _____	

Last Name	First Name			Middle Name
Physical Address *Number*	*Street*	*City*	*State*	*Zip Code*
Mailing Address		*City*	*State*	*Zip Code*
Telephone Number (s)		Social Security Number (Voluntary)		

Best time to contact you at home is:..... ____:____AM/PM

If you are under 18 years of age, can you provide required proof of your eligibility to work?..... ☐ YES ☐ NO

Have you ever filed an application with us before? If Yes, give date _____..... ☐ YES ☐ NO

Have you ever been employed with us before? If Yes, give date _____..... ☐ YES ☐ NO

Do any of your friends or relatives work here?..... ☐ YES ☐ NO
If yes, state name, relationship and location _____

Are you currently employed?..... ☐ YES ☐ NO

May we contact your present employer?..... ☐ YES ☐ NO

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? ☐ YES ☐ NO
Proof of citizenship or immigration status will be required upon employment. .....

Date available for work _____ What is your desired salary range? _____

Are you available to work: ☐ Full Time (Please indicate 1 2 3 Shift)
☐ Part Time (Please indicate Mornings Afternoon Evenings)
☐ Temporary (Please Indicate Dates Available _____ - _____)

Are you currently on "lay-off" status and subject to recall?..... ☐ YES ☐ NO

Can you travel if a job requires it?..... ☐ YES ☐ NO

EDUCATION

School	Name and Address of School	Course of Study	Number of Years Completed	Diploma / Degree
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

ADDITIONAL INFORMATION

State any additional information you feel may be helpful to us in considering your application, including any job-related training in the U.S. Military.

_____

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.
Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation?
_____ YES _____ NO

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. Exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/ Salary		
Supervisor	Starting	Final	
Reason for Leaving		May We Contact ☐ Yes ☐ No	

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/ Salary		
Supervisor	Starting	Final	
Reason for Leaving		May We Contact ☐ Yes ☐ No	

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/ Salary		
Supervisor	Starting	Final	
Reason for Leaving		May We Contact ☐ Yes ☐ No	

REFERENCES Do not include family members or past supervisors.

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationships with this organization is of an *"at will"* nature, which means that the employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this *"at will"* employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

________________________ Signature of Applicant

__________________ Date