Water/Wastewater Dispatcher I and II REQUEST FOR PROGRESSION

- NOTE: This information is to be used as a cover sheet/checklist for the progression packet after all requirements are met. Please retain a copy for your records.

GENERAL INFORMATION: (Please	Print)					
Employee's Name:			Phone #:			
Employee's Date of Hire: Date to Class			Employee current position title:			
Supervisor's Name:			Phone #:			
Supervisor's Title: Ler		_ Length	ngth of time you have supervised employee:			
Current Classification						
☐ Water/Wastewater Dispatcher I			☐ Water/Wastewater Dispatcher I			
NOTE: The following attendance infor	mation must be co	ompleted	l by attendar	nce keep	er.	
Usage within the last 12 months:	Sick Leave	hours	LWOP	hours	Sick Leave Accrual	hours
Signature of person verifying attendar	nce:		Date	:	Phone #:	
REQUEST: I would like to be review	wed for the follov	ving:				
 □ Water/Wastewater Dispatcher I 1st Proficiency Increase □ Water/Wastewater Dispatcher I Appr 2nd Proficiency Increase □ Water/Wastewater Dispatcher I Appr 3rd Proficiency Increase □ Water/Wastewater Dispatcher I Appr 4th Proficiency Increase 			☐ To become Water/Wastewater Dispatcher II ☐ Water/Wastewater Dispatcher II 1st Proficiency Increase ☐ Water/Wastewater Dispatcher II 2nd Proficiency Increase ☐ Water/Wastewater Dispatcher II 3rd Proficiency Increase ☐ Water/Wastewater Dispatcher II 4th Proficiency Increase			
CHECKLIST OF SUBMITTED DOCU	MENTATION:					
 □ Original High School transcript or G □ Proof of completion of Water/Waste □ Proof of completion of Water/Waste □ Proof of completion of the Dealing of Course credits □ Proof of completion of the Okie 811 □ Proof of completion of a Field Empl □ Proof of completion of the Level I S □ Proof of completion of Prism Training (for Water Distribution employees) or □ Proof of completion of Office Safety □ Proof of completion of the Water/Se □ Obtains a ODEQ Class "D" Water/W □ Successful completion of the Six Si □ Proof of completion of the Conflict Foredits) 	ewater's Lucity trainer water's GIS (Atlast with Difficult Peoplement of Golden Shovel Trainer Resolution 101 trainer water's Lucity Trainer of	s) training raining with Assewith an 8 byees) on approveded by CC ass Training ining or to	essment tota 0% pass rat proof of col d by manage T ng totaling s ense applica	aling eigh e mpletion ement. sixteen (1 ble to the	of the Meter Maintenan 6) hours e employee's position	ce Training
 □ Proof of completion of an Advanced □ Successful completion of the Six Si □ Proof of completion of PACP/MACF Water Quality training assessment (fo □ Successful completion of the American equivalent as approved by management 	gma Yellow Belt T P/LACP training ce r Water Distributio can Water Works	raining ertification on emplo	n (for SOM e	equivale	ent as approved by man	agement.

Proof of completion of a Diversity, Equity, and Inclusion training, as approved by management (1.0 course credits)
Proof of completion of Business Leadership Development training, as approved by management (1.0 course credits)
Successful completion of ICS 100, 200, 800 or an equivalent Federal Emergency Management Agency training totaling seven (7) hours
Obtains a ODEQ Class "C" Water/Wastewater Operator's License
"Successful completion of Writing Effective Emails in the Workplace training or the equivalent, as approved by management
"Proficient" rating on current PPR form

I have attached all the required documentation as stated in the Water/Wastewater Dispatcher I and II Criterion Document and corresponding Policies and Procedures to be used to evaluate my request for a proficiency or progression increase. I am performing the responsibilities required for my level and have completed the appropriate coursework, training and/or other requirements.

Employee's Signature:
Date:
Date:
Date:

(Continued from Water/Wastewater Dispatcher I and II Request for Progression Pg. 2)