

TREATMENT PLANT OPERATOR 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. **Employees requesting proficiency or progression increase must not be on a City Performance Improvement Plan at the time of the request.**

GENERAL INFORMATION: (Please Print)

Employee's Name: _____ Phone #: _____

Employee's Date of Hire: _____ Date to Class _____ Employee current position title: _____

Supervisor's Name: _____ Supervisor's Title: _____

Phone #: _____ Length of time you have supervised the employee: _____

Current Classification

Treatment Plant Operator I

Treatment Plant Operator II

Treatment Plant Operator III

Treatment Plant Operator IV

NOTE: The following attendance information must be completed by attendance keeper.

Usage within the last 12 months: Sick Leave ___ hours LWOP ___ hours Sick Leave Accrual ___ hours

Signature of person verifying attendance: _____ Date: _____ Phone #: _____

REQUEST: I would like to be reviewed for the following:

Treatment Plant Operator I

- Proficiency Increase
- Progression to a TPO II

Treatment Plant Operator II

- Progression to a TPO III
- Proficiency Increase
- Advanced Certification Increase

Treatment Plant Operator III

- Proficiency Increase
- Advanced Certification Increase
- Progression to a TPO IV

Treatment Plant Operator IV

- Proficiency Increase
- Advanced Certification Increase

CHECKLIST OF SUBMITTED DOCUMENTATION:

For all Proficiencies:

- Original High School transcript or GED Certificate, **if not previously submitted**
- Original college transcript
- Educational equivalent certificates
- Applicable ODEQ licenses

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Treatment Plant Operator I through IV Proficiencies

Completes one (1) course credit from the internal City of Tulsa Development Training Course Catalogue, not previously submitted, as approved by management, in the following category:

- Safe and Respectful Workplace
- Development for Personal Growth **or** Communication and Interpersonal Skills
- Computer Skills
- Leveraging Data **or** Business Leadership Skills

Completes the applicable number of college hours or the equivalent to the applicable college from listed in the "Approved Educational Equivalent Credits"

- Six (6) hours Twelve (12) hours Twenty-four (24) Hours Thirty-six (36) Hours

Advanced Certification Increase

- Obtains the Oklahoma Department of Environmental Quality Class "C" Laboratory Operator Certification
- Obtains the Oklahoma Department of Environmental Quality Class "B" Laboratory Operator Certification
- Obtains the Oklahoma Department of Environmental Quality Class "A" Laboratory Operator Certification **and** the ODEQ Class "A" Operator Certification.

I have submitted or attached all the required documentation as stated in the Treatment Plant Operator Criterion Document and corresponding policies and procedures to be used to evaluate my request for progression. I am performing the responsibilities required for my level and have completed the appropriate coursework, training and certifications.

Employee's Name (Print and Sign): _____ Date: _____

Supervisor's Name (Print and Sign): _____ Date: _____