

Sandwich Water District
Application Instructions For
Office Manager/Rate Collector Position

The Sandwich Water District is now accepting applications for the position of Office Manager/ Rate Collector. The application package including the job description is available at the District office located at:

72 Tupper Rd. Sandwich MA.

Or online at:

www.sandwichwater.com

In addition to the Application please submit a resume if necessary and a cover letter with any additional pertinent information by November 1, 2017 to the District Office or PO Box 600 Sandwich Ma. 02563

SANDWICH WATER DISTRICT

72 TUPPER ROAD
SANDWICH, MASSACHUSETTS
02563



APPLICATION FOR EMPLOYMENT

Sandwich Water District

Job Title: Office Manager/Rate Collector

General Description

Office Manager is responsible for supervising clerical staff and oversight of all customer service matters related to billing, for coordinating and providing a range of secretarial and clerical duties, invoicing, water billing, meter reading data, accounting, assignment of work orders, record keeping, answering phones, ordering supplies, maintaining office equipment and many other tasks to support the operation of the District office and administration.

Examples of Work

The work or duties listed below are intended as illustrations of the various type of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related, or a logical assignment to the position.

- Exercises immediate supervision over clerical staff.
- Manages water billing
- Attends meetings to discuss and present issues and updates on billing etc.
- Oversight and preparation of water meter readings and water bills for mailing
- Oversees and performs customer service response to questions and concerns over bills, water quality, setting up final reads, appointments for new water meters and repairs, water turn-ons and offs.
- Makes, files and mails copies of water tests to state and federal agencies.
- Works with the District and Town Collector/Treasurers to prepare delinquent notices and transfers to lien for unpaid bills.
- Performs confidential administrative tasks for the Superintendent and Assistant Superintendent when requested; keeps the Superintendent fully informed regarding all office activities and problems.
- Prepares final reports drafted by the Superintendent and other staff members.

Supervision Received

Office Manager is under direct supervision of the Water District Superintendent and Assistant Superintendent. Manager plans and prioritizes the majority of the work independently, in accordance with standard practices and previous training. Manager is expected to solve most problems of detail or unusual situations by adapting methods or interpreting instructions accordingly. Technical and policy problems or changes in procedure are discussed with Superintendent.

Supervision Exercised

Office Manager is accountable for the quality and quantity of work done by clerical staff and assures the accomplishment and quality of the assigned work in the prescribed manner. Manager informs clerical staff of organizational policies, goals and procedures; resolves office staff complaints and effects disciplinary actions, such as written warnings and reprimands; has substantial responsibility for technical soundness of clerical staff work.

Confidentiality

Manager has access to some confidential information in the performance of their duties.

Minimum Qualifications

Associates Degree in Business Administration or closely allied field, Bachelor Degree preferred, and 3 years of experience including 1 year in a supervisory capacity. Must be bondable. Municipal experience preferred. A valid MA driver's license.

Knowledge, Ability, and Skills

Must have knowledge of office management principles and practices, have experience and possess excellent computer skills including, Excel, Microsoft Word, and QuickBooks. Past experience with water or utility billing software systems is a plus.

Ability to establish and maintain effective working relationships with clerical staff and other employees.

Possess good people/customer service skills in dealing with the general public.

IMPORTANT

Instructions for completing the application form.

1. Type or print clearly in black or blue ink.
2. Answer every question fully and accurately.
3. As an applicant for employment the Sandwich Water District will review, if applicable:
 - Criminal Offender Record Information (C.O.R.I) and;
 - The Central Registry of Child Abuse/Neglect reports maintained in accordance with M.G.L. Chapter 119, Section 51 B.
4. If an offer of employment is made to you, the Sandwich Water District may identify that it is contingent upon the results of a medical exam and/or a tax and background check.
5. FALSE OR MATERIALLY INACCURATE INFORMATION ON THIS APPLICATION WILL BE CAUSE FOR DISQUALIFICATION FOR EMPLOYMENT OR DISMISSAL AT ANY TIME AFTER EMPLOYMENT.
6. Read certification and releases carefully before signing.
7. Return completed application.

This application will be kept on file for at least 30 days.

SANDWICH WATER DISTRICT

APPLICATION FOR EMPLOYMENT

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

It is the policy of the Sandwich Water District to afford equal employment opportunity to all qualified persons regardless of race, color, religion, national origin, age, military status, sexual orientation, disability, or gender, except where age or sex is a bonafide occupational qualification as allowed by the Civil Rights Act of 1964.

PERSONAL INFORMATION

Name (First) (Middle) (Last) <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	Home Telephone Number
Mailing Address (Street) (City) (State) Zip(Postal) Code	Business or Message Phone:
Home Address (if different from mailing address)	E-Mail Address:
Are you authorized to work in the U.S. on an unrestricted basis? YES <input type="checkbox"/> NO <input type="checkbox"/>	National ID (SS #) (optional)
Are you over age 18? YES <input type="checkbox"/> NO <input type="checkbox"/>	Who referred you to us? Agency <input type="checkbox"/> Employee <input type="checkbox"/> Newspaper advertisement <input type="checkbox"/> Other _____ _____ _____
Have you been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> (Conviction will not necessarily disqualify an applicant from employment.) If yes, please explain.* _____ _____	
Have you been convicted of a misdemeanor other than a first misdemeanor conviction for drunkenness, simple assault, speeding, minor traffic violations, affray, or disturbance of the peace within the last 5 years? YES <input type="checkbox"/> NO <input type="checkbox"/> (Conviction will not necessarily disqualify an applicant from employment.) If yes, please explain.* _____ _____	
<p>*"An applicant for employment with a sealed record on file with the Commissioner of Probation may answer 'no record' with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. In addition, any applicant for employment may answer 'no record' with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution." <i>MGL Ch. 276, Section 100A.</i></p>	

EMPLOYMENT DESIRED

POSITION APPLIED FOR:	Date you can start
Have you worked for the Municipal Water Supply before? YES <input type="checkbox"/> NO <input type="checkbox"/>	Starting salary desired
Are you available for full time work? YES <input type="checkbox"/> NO <input type="checkbox"/>	Are you available for part time work? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you reviewed the essential functions of the job as listed on the job posting? YES <input type="checkbox"/> NO <input type="checkbox"/>	
In addition to your work history, what other experiences, skills or qualifications would qualify you for work with our agency? _____	

EDUCATION

Name of School	Location City State	Main Course of Study	Did you Graduate	Degree
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List any additional education or training:

PROFESSIONAL REFERENCES (not personal): List 3 people not related to you who can comment on your work performance.

Name	Address	Occupation	Telephone Number	Years Acquainted
1				
2				
3				

MILITARY SERVICE INFORMATION

This information is furnished on a voluntary basis.

Check all that apply to you: Veteran Disabled Veteran Vietnam Era Veteran

Dates of Service: to Branch

If Vietnam Era Veteran, have you been certified by the State Office of Affirmative Action? YES NO

If yes, what is the Certification #? _____

(Please attach Form DD214 or a copy of SOAA certification.)

EMPLOYMENT HISTORY

Are you employed now? Yes No

COMPLETE ALL INFORMATION IN FULL

(A resume may not be substituted but may be included as a supplement)
 Begin with your most recent employment, including any present employment. Your present employer will not be contacted without your permission. You may include any verifiable work performed on a volunteer basis. Any gaps in employment must be briefly explained.

Company Name		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Street Address		Telephone	Specific Duties
City & State		Postal Code	
Job Title			
Supervisor			
Dates Employed:		From To	Salary
			Reason for Leaving
Company Name		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Street Address		Telephone	Specific Duties

City & State		ZIP (Postal) Code		
Job Title				
Supervisor				
Dates Employed:		From	To	Salary
				Reason for Leaving
Company Name				May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address		Telephone		Specific Duties
City & State		ZIP (Postal) Code		
Job Title				
Supervisor				
Dates Employed:		From	To	Salary
				Reason for Leaving
Company Name				May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address		Telephone		Specific Duties
City & State		ZIP (Postal) Code		
Job Title				
Supervisor				
Dates Employed:		From	To	Salary
				Reason for Leaving

IF YOU NEED ADDITIONAL SPACE PLEASE ATTACH A SEPARATE SHEET

**RELEASE AND CERTIFICATION
PLEASE READ BEFORE SIGNING**

I understand that the foregoing will be verified in order to expedite my application for employment with the Sandwich Water District. I hereby authorize the Sandwich Water District to conduct a full investigation into my background.

I authorize the Sandwich Water District to obtain my previous work records, employment records, character references and any other information concerning character, ability and habits and all other necessary information. Further I grant authority to the keeper of these records to release said records to the Sandwich Water District for the purpose of making its hiring decision. I agree that the Sandwich Water District shall not be liable in any respect if a job offer is not extended, is withdrawn, or my employment is terminated because of false statement, omissions or answers made by me on this application. I agree that my previous employers shall not be liable with regard to any information provided by them in connection with this release.

I certify under the pains and penalty of perjury that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing, which, if disclosed, would affect this application unfavorably. I understand that any false statements, omissions or answers made by me on this application can result in my immediate termination.

In compliance with the Immigration and Reform and Control Act of 1986, I understand that I will be required to provide approved documentation that verifies my right to work in the United States on my first day of employment. I have received the list of approved documents with this application.

I understand that unless I am subject to the terms of a collective bargaining agreement, my employment will be at-will, which means that both the Sandwich Water District and I are free to terminate the employment relationship at any time for any non-statutorily prohibited reason or for no reason at all, with or without notice.

I hereby acknowledge that I have read in full and understand the above statements and conditions of employment.

Signature of Applicant

Date

Printed Name

“It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.”

MGL Ch.149, Section 19B

MISCELLANEOUS JOB-RELATED INFORMATION

CERTIFICATIONS AND LICENSES

List any professional licenses, registrations or certifications you possess:

License _____	License Number _____	Date Issued _____	Expiration Date _____
License _____	License Number _____	Date Issued _____	Expiration Date _____
License _____	License Number _____	Date Issued _____	Expiration Date _____

IMMIGRATION REFORM AND CONTROL ACT REQUIREMENT

In compliance with the Immigration and Reform and Control Act of 1986, you will be required to provide approved documentation that verifies your right to work in the United States prior to beginning work here at the Sandwich Water District. Please be prepared to provide any of the following documentation if you are offered and accept a position with us:

Any **one** of the following: (These establish both identity and employment authorization)

1. U.S. Passport
2. Certificate of U.S. citizenship (issued by Immigration & Naturalization Service)
3. Certificate of Naturalization (issued by INS)
4. Current foreign passport with valid endorsement authorizing employment
5. Resident alien card or other alien registration card, with photo or other approved identifying information, which evidences employment authorization

OR one from List A and one from List B:

LIST A These establish employment authorization:

1. Social Security Card (unless it specifies that it does not authorize employment)
2. Certificate of U.S. birth or other documentation which establishes U.S. nationality or birth
3. Other approved documentation

LIST B These establish identity:

1. Driver's license or similar state I.D. card with photo or other approved identifying information
2. Other approved documentation of identity for applicants under age 16 or from a state which does not issue an I.D. card (other than a driver's license)

THIS VERIFICATION PROCESS IS REQUIRED FOR ALL EMPLOYEES HIRED ON OR AFTER NOVEMBER 6, 1986.