



NOTICE OF JOB OPENING
Water Distribution Specialist I
Multiple Openings

Classification: Grade 3, Non-Exempt (\$20.34 hourly)

Summary of Job Duties and Responsibilities The WATER DISTRIBUTION SPECIALIST I receives training in work methods and procedures; performs manual and semi-skilled construction and maintenance work under close supervision; operates construction and maintenance equipment (may operate Backhoes/Mini-Ex); performs clean-up work; notifies customers when water is being shut off for repair work; subject to calls; may act as temporary relief for other Distribution Department positions; and performs other essential duties as assigned.

Knowledge, Skills, and Abilities

- Knowledge of basic hand tools including wrenches, sockets, picks, and shovels.
- Knowledge of general vehicle maintenance to check fluids, belts, etc. and to ensure a safe vehicle operation.
- Ability to complete records
- Ability to read and write legibly
- Ability to read Tape Measure and O.D. tape correctly.
- Ability to lift a minimum of 90lbs
- Ability to use basic hand tools including wrenches, sockets, picks, and shovels.
- Ability to work from verbal, written, diagrammed, and radioed/phone instructions.
- Ability to learn and use related construction safety practices and equipment.
- Ability to drive standard transmission vehicles.
- Ability to perform manual labor in all weather conditions.
- Ability to work in confined spaces.
- Ability to work and perform duties in trenches consisting of mud and water.
- Ability to read and write legibly
- Ability to follow pre-established processes and procedures.

Minimum Qualifications

- Three (3) months of related experience such as plumbing, construction or outdoor physical labor.
- Must be able to obtain a Class A Commercial Driver's License with airbrakes and combination endorsement within 12 months of being hired.

Preferred Qualifications

- Knowledge of Backhoe/Mini-Ex, Tractor, Air Compressor, and Jackhammer operations
- Knowledge of general water construction

Additional Skills-Based Pay in addition to base hourly pay:

Possesses an Arkansas Class A CDL – ½ step

Possess an Arkansas Water Distribution License:

- Distribution 1 – ½ step
- Distribution 2 – ¾ step
- Distribution 3 – 1 step

Fluent in Spanish – 1 step

Special Requirements

- Must be 18 years or older
- Must pass a criminal background check (all positions if filled by external candidate).
- Must have a valid Arkansas Driver's License.
- Must have and maintain a good driving record (see Good Driving Record definition).
- Must pass pre-employment drug screening and be subject to random screening pool requirements during employment (see Safety Sensitive information).
- Must pass a fitness exam (if position filled by external candidate or current employee in position that doesn't require fitness exam).
- Must live within a 26-mile radius of I-630 and John Barrow Road to reasonably respond to on-call duty.
- Must maintain a personal telephone due to on-call duty.
- Must be able to respond to call outs on nights, weekends, and holidays per on call assignments and emergency work.
- Must possess good interpersonal skills to effectively communicate with customers and/or two-way radio and phone.
- Must be a high-performing, innovative, values-driven, informed, and passionate individual.

Work Conditions

Works outside in all types of weather and may be exposed to extreme heat, rain, snow, sun, etc.

Must perform heavy lifting as ongoing requirement of job.

Exposed to dirt, mud, water, etc. on a continuous basis.

May be exposed to insects, snakes, dogs, poison ivy and other potentially hazardous plants and animals.

This is a safety sensitive position due to utility driving requirements and Arkansas Water Distribution

License required by the State Health Department. Position requires discharging duties fraught with risks of injury to others so that even a momentary lapse of attention can have disastrous consequences.

The above describes the general content and requirements for this job. It is not intended to be an all-inclusive list of duties, responsibilities, or requirements.

How to Apply

- o Complete the internal application form attached to this posting.
 - o Send your completed application form and optional resume to careers@carkw.com.
 - o In the email subject line, please include your full name and the position you are applying for.
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Central Arkansas Water is an EQUAL OPPORTUNITY EMPLOYER that does not discriminate in its employment practices.

www.carkw.com



APPLICATION FOR EMPLOYMENT CENTRAL ARKANSAS WATER

An incomplete or illegible application may jeopardize your opportunity for employment. Because eligibility to compete for positions is based on a review of your application and since only information provided will be evaluated, be certain that you complete all items as fully and accurately as possible.

NAME _____ DATE _____
LAST FIRST MIDDLE

STREET ADDRESS _____ HOME PHONE _____

CITY STATE ZIP

BUSINESS PHONE _____

CELL PHONE _____

ARE YOU A CITIZEN OF THE UNITED STATES OR ARE YOU LAWFULLY ELIGIBLE TO BECOME EMPLOYED IN THE U.S.?

YES NO (Proof of U.S. citizenship or immigration status will be required if employed)

POSITION YOU ARE APPLYING FOR _____

TYPE OF EMPLOYMENT DESIRED: FULL-TIME TEMPORARY SUMMER PART TIME

DATE AVAILABLE _____ SALARY REQUIREMENTS \$ _____

WHERE DID YOU HEAR ABOUT THIS OPENING? NEWSPAPER JOB LINE EMPLOYEE REFERRAL OTHER _____

*****LIST PREVIOUS EMPLOYMENT, BEGINNING WITH THE LAST*****

FROM DATE (Mo/ Yr)	TO DATE (Mo/ Yr)	NAME AND LOCATION OF EMPLOYER	SUPERVISOR	YOUR JOB	REASON FOR LEAVING	FULL OR PART TIME

TYPE SCHOOL	NAME & ADDRESS	GRADUATED?	PRIMARY COURSES OF STUDY	
HIGH SCHOOL	XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX		XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX	
BUSINESS OR TRADE SCHOOL				
COLLEGE			Major:	Degree:
			Minor:	
GRADUATE SCHOOL			Degree:	
CORRESPONDENCE COURSES OR SPECIAL TRAINING				

Excluding those which would reveal sex, race, religion, national origin, age, ancestry, disability or other protected status, list any professional, trade, business or civic organizations with which you are associated:

List professional, business or trade licenses held, awards or special recognitions received:

LIST THREE WORK-RELATED REFERENCES:

NAME	OCCUPATION	EMPLOYER	PHONE #	ASSOCIATION (Peer vs. supervisor)

Have you previously been interviewed for a position with Central Arkansas Water? If yes, provide positions and dates:

Have you ever been employed by Central Arkansas Water? If yes, provide position, dates, and reason for leaving:

* Do you understand the physical and mental requirements of the job for which you are applying? Yes No

* Are you able to fully and completely perform all functions, duties and responsibilities of the particular job for which you are applying with or without an accommodation?

Yes No If no, please provide an explanation: _____

* **The Americans With Disabilities Act of 1990 prohibits discrimination against a qualified individual with a disability.**

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Central Arkansas Water embraces a diverse and inclusive environment. As an Equal Opportunity Employer, all applicants who meet the stated qualifications will be considered for employment without regard to race, color, religion, gender, gender identity or expression, sexual orientation, national origin, genetics, disability, age or veteran status. CAW is also committed to compliance with all fair employment practices.  
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• I, _____, understand and voluntarily agree that Central Arkansas Water (or an investigative bureau of your choice) may check any references or other information provided on this application form by me. Further, I hereby give consent to any and all current and prior employers of mine, or educational institutions I have attended, to provide information to Central Arkansas Water with regard to my employment with current or prior employers or my educational background. I understand and accept that your employment decision may be based upon information furnished by me or obtained through the verification process. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information. I authorize you to make copies of documents related to my employment, which shall have the same effect as the originals.

Signed: _____

Date: _____

- I understand and agree that if I am offered and accept a position with the Central Arkansas Water, that the position is not for a specific period of time, and I agree that I will be an employee at will and this arrangement can be terminated at any time by myself or Central Arkansas Water, with or without notice.
- If employed by Central Arkansas Water, I agree to abide by its rules and regulations.
- I understand and agree to examinations and testing, including a pre-employment physical, criminal background check, and drug screening, considered necessary by Central Arkansas Water at any time, at the option of the Utility and at no personal expense to me. I authorize the examining physician or organization to disclose to Central Arkansas Water or its representatives the results of such examinations, tests, or background information. I understand Central Arkansas Water will limit such information only to those individuals who have a need to be informed of such.
- I understand that, unless I am notified by Central Arkansas Water otherwise, this application will be considered only for the position I designated on this application form. I understand that in order to be considered for other available positions with Central Arkansas Water, I will need to complete a separate application for each position.

I hereby affirm that my answers to the foregoing questions are true and correct, and I understand that misrepresentation or omission of facts called for in this application may be cause for disqualification for consideration of the position, or if employed by Central Arkansas Water, immediate dismissal without notice.

Signature of Applicant

Date



EQUAL OPPORTUNITY EMPLOYER

221 East Capitol Avenue * PHONE (501) 377-1251 * LITTLE ROCK, AR 72202

NAME: _____

ADDRESS: _____

SUPPLEMENTARY INFORMATION REQUEST

Describe, in detail, your present position responsibilities. Include day to day work activities, machinery operated, if any, etc. (Continue on back, if needed.)

Date Employed: _____ Company: _____
(Mo/Yr)

Job Title: _____ Company Phone Number: _____

Responsibilities: _____

Provide the information requested below concerning the three positions held prior to your current position. If you have held other positions which are directly related to the position applied for, please continue on the back. When outlining previous job responsibilities, be sure to explain all duties and responsibilities that are directly related to the requirements listed on the job posting for which you are applying.

1. Dates of Employment: _____ to _____ Company: _____
(Mo/Yr) (Mo/Yr)

Job Title: _____ Company Phone Number: _____

Responsibilities: _____

2. Dates of Employment: _____ to _____ Company: _____
(Mo/Yr) (Mo/Yr)

Job Title: _____ Company Phone Number: _____

Responsibilities: _____

3. Dates of Employment: _____ to _____ Company: _____
(Mo/Yr) (Mo/Yr)

Job Title: _____ Company Phone Number: _____

Responsibilities: _____

**WATER DISTRIBUTION SPECIALIST I
QUESTIONNAIRE**

NAME: _____
(PRINT)

DATE: _____

DIRECTIONS: PLEASE ANSWER EACH QUESTION. DO NOT WRITE "SEE RESUME" OR "SEE REFERENCE LETTER" ON THE ANSWER LINES. IF YOU NEED ADDITIONAL SPACE, PLEASE WRITE ON THE BACK OR ATTACH ANOTHER SHEET. FAILURE TO ANSWER ALL QUESTIONS MAY RESULT IN YOU NOT BEING INTERVIEWED.

ARE YOU **18 YEARS OLD OR OLDER?** ___ YES ___ NO

DO YOU HAVE A **PERSONAL TELEPHONE?** ___ YES ___ NO
IF NO, WILL YOU **ACQUIRE & MAINTAIN** ONE IF OFFERED THIS POSITION? ___ YES ___ NO

DO YOU HAVE A **VALID ARKANSAS DRIVERS LICENSE?** ___ YES ___ NO
DO YOU HAVE A **GOOD DRIVING RECORD?** (SEE ATTACHED SHEET) ___ YES ___ NO

DO YOU LIVE WITHIN **THE 26-MILE RADIUS OF I-630 and JOHN BARROW ROAD** IN LITTLE ROCK?
(SEE ATTACHED MAP) ___ YES ___ NO
IF NO, WILL YOU **MOVE** WITHIN THE RADIUS IF OFFERED THIS POSITION? ___ YES ___ NO

ARE YOU ABLE TO FULFILL THE STANDBY REQUIREMENTS OF THIS POSITION, INCLUDING **CALL OUT RESPONSE DURING NIGHTS, WEEKENDS, & HOLIDAYS?** ___ YES ___ NO

CAN YOU OPERATE?

HANDTOOLS-INCLUDING SHOVELS, WRENCHES, ETC.	___ YES ___ NO	_____ YEARS OF EXPERIENCE
JACKHAMMER	___ YES ___ NO	_____ YEARS OF EXPERIENCE
SAWS	___ YES ___ NO	_____ YEARS OF EXPERIENCE
CONCRETE SAW	___ YES ___ NO	_____ YEARS OF EXPERIENCE
CONCRETE MIXER	___ YES ___ NO	_____ YEARS OF EXPERIENCE
AIR COMPRESSOR	___ YES ___ NO	_____ YEARS OF EXPERIENCE
BORING & TUNNELING EQUIPMENT	___ YES ___ NO	_____ YEARS OF EXPERIENCE
DRILL	___ YES ___ NO	_____ YEARS OF EXPERIENCE
ASPHALT PACKER & ROLLING MACHINE	___ YES ___ NO	_____ YEARS OF EXPERIENCE
SOD CUTTER	___ YES ___ NO	_____ YEARS OF EXPERIENCE
PIPE CUTTER	___ YES ___ NO	_____ YEARS OF EXPERIENCE
TWO-WAY RADIO	___ YES ___ NO	_____ YEARS OF EXPERIENCE
DUMP TRUCK	___ YES ___ NO	_____ YEARS OF EXPERIENCE
BACKHOE	___ YES ___ NO	_____ YEARS OF EXPERIENCE
TAPPING MACHINE	___ YES ___ NO	_____ YEARS OF EXPERIENCE

THIS IS A SAFETY SENSITIVE POSITION REQUIRED TO OPERATE A UTILITY VEHICLE. PLEASE INITIAL. _____

NAME: _____

DO YOU HAVE THE ABILITY TO?

- COMPLETE REPORTS ___ YES ___ NO
- LIFT A MINIMUM OF 80 POUNDS ___ YES ___ NO
- USE BASIC HANDTOOLS INCLUDING WRENCHES, PICKS, & SHOVEL ___ YES ___ NO
- WORK FROM VERBAL, WRITTEN, DIAGRAMMED & RADIOED INSTRUCTIONS ___ YES ___ NO
- LEARN & USE RELATED CONSTRUCTION SAFETY PRACTICES & EQUIPMENT ___ YES ___ NO
- LEARN TO DRIVE STANDARD TRANSMISSION VEHICLE ___ YES ___ NO
- PERFORM MANUAL LABOR OUTDOORS IN ALL WEATHER CONDITIONS ___ YES ___ NO
- WORK IN CONFINED SPACES ___ YES ___ NO

HAVE YOU HAD A JOB THAT REQUIRED YOU TO RESPOND TO CALL OUT NIGHTS, WEEKENDS, AND HOLIDAYS? ___ YES ___ NO **HOW LONG?** _____ **WHERE?** _____

EXPLAIN: _____

DO YOU POSSESS GOOD INTERPERSONAL SKILLS TO EFFECTIVELY COMMUNICATE WITH CUSTOMERS AND/OR USE TWO-WAY RADIO? ___ YES ___ NO

EXPERIENCE: _____

WHAT AMOUNT OF WATER SERVICE (INDUSTRY) WORK EXPERIENCE DO YOU HAVE?
___ YEARS ___ MONTHS **WHERE?** _____

DESCRIBE EXPERIENCE: _____

DO YOU HAVE WORK EXPERIENCE NOTIFYING CUSTOMERS WHEN A SERVICE IS INTERRUPTED?
___ YES ___ NO **WHERE?** _____ **HOW LONG?** _____

EXPLAIN, IN DETAIL, YOUR EXPERIENCE: _____

NAME: _____

HAVE YOU PERFORMED THE FOLLOWING MANUAL AND SEMI-SKILLED CONSTRUCTION MAINTENANCE ACTIVITIES?

- Performed Preventive Maintenance Checks ___ YES ___ NO
- Obtained Correct Tools and Fittings as Instructed ___ YES ___ NO
- Received Work Instructions Verbally, Written and/or by Radio ___ YES ___ NO
- Dug Ditches using a Pick and Shovel ___ YES ___ NO
- Assisted in Laying and Tapping Mains and Connecting Lines ___ YES ___ NO
- Set Fire Hydrants and Valve Boxes ___ YES ___ NO
- Installed Fire Hydrants, Valve Boxes, Services and Related Work ___ YES ___ NO
- Assisted in Repairing Fire Hydrants, Mains and Services ___ YES ___ NO
- Replaced New Services and Located Valves ___ YES ___ NO
- Packed Turn On and Off Valves ___ YES ___ NO
- Set up Traffic Control Devices ___ YES ___ NO
- Acted as Flagman ___ YES ___ NO
- Served as Spotter for Other Workers ___ YES ___ NO
- Performed Safety Procedures ___ YES ___ NO
- Performed Routine Work Independently ___ YES ___ NO

DO YOU HAVE KNOWLEDGE OR EXPERIENCE IN THE USE OF THE FOLLOWING BASIC HAND TOOLS?

- WRENCHES ___ YES ___ NO IF YES, HOW MANY YEARS OF EXPERIENCE? _____
- SOCKETS ___ YES ___ NO IF YES, HOW MANY YEARS OF EXPERIENCE? _____
- PICK ___ YES ___ NO IF YES, HOW MANY YEARS OF EXPERIENCE? _____
- SHOVEL ___ YES ___ NO IF YES, HOW MANY YEARS OF EXPERIENCE? _____

WHAT HAVE YOU USED WRENCHES TO DO? _____

NAME THE DIFFERENT TYPES OF WRENCHES: _____

WHAT HAVE YOU USED SOCKETS TO DO? _____

NAME THE DIFFERENT TYPES OF SOCKETS: _____

WHAT HAVE YOU USED SHOVELS TO DO? _____

NAME THE DIFFERENT TYPES OF SHOVELS: _____

WHAT HAVE YOU USED A PICK TO DO? _____

NAME: _____

DO YOU HAVE KNOWLEDGE OF OR EXPERIENCE WITH A **JACKHAMMER**? ____ YES ____ NO
IF YES, **HOW LONG?** _____ YEARS **WHAT HAVE YOU USED THE JACKHAMMER TO DO?** _____

DO YOU HAVE KNOWLEDGE OF OR EXPERIENCE WITH A **TRACTOR**? ____ YES ____ NO
IF YES, **HOW LONG?** _____ YEARS **WHAT HAVE YOU USED THE TRACTOR TO DO?** _____

DO YOU HAVE KNOWLEDGE OF OR EXPERIENCE WITH **AIR COMPRESSORS EQUIPMENT**? ____ YES ____ NO
IF YES, **HOW LONG?** _____ YEARS **WHAT TYPE OF JOBS HAVE YOU USED AIR COMPRESSORS EQUIPMENT TO DO?** _____

Are you able to fully and completely perform all functions, duties, and responsibilities of the Water Distribution Specialist I position for which you are applying? ____ Yes ____ No If no, please provide an explanation: (**do not include medical information**) _____

Signature

Date



TRAFFIC VIOLATION QUESTIONNAIRE AND RELEASE
CENTRAL ARKANSAS WATER

List all moving traffic violations you have been charged with in the past three (3) years:

None See Below

- * I understand that the position I am applying for requires the successful applicant to drive a Utility owned vehicle as a normal part of the job requirements.
* I understand that Central Arkansas Water will investigate the driving record of all applicant finalists and that information received regarding such will be considered in the selection of the successful applicant.
* I understand that it is the policy of Central Arkansas Water to require all employees with such responsibilities to maintain a valid driver's license appropriate to the type of vehicle to be driven and to maintain a good driving record free of multiple minor offenses and any major driving offenses.
* I understand that employees of Central Arkansas Water are subject to on-going investigations of their driving records at the discretion of the Utility and/or the Utility's insurance carrier.
* I understand that if an employee required to drive a Utility vehicle as a normal part of his/her job has his/her driver's license restricted, suspended or revoked and he/she is no longer legally able to drive, the employee may be subject to reduction in job status and pay grade or may be terminated for failing to meet the minimum job requirements.

I hereby affirm that my answers to the foregoing questions regarding my traffic violation history and the Traffic Violation Release Form below are true and correct. I also affirm that I have read and understand the conditions and requirements regarding positions with the Central Arkansas Water that require driving a Utility vehicle. I further understand that misrepresentation or omission of facts called for on this questionnaire may be cause for disqualification from consideration for the position applied for or, if employed by Central Arkansas Water, immediate dismissal without notice.

Signature of Applicant Date

(CAWTRAFFIC 7/01)

TRAFFIC VIOLATION RELEASE FORM
CENTRAL ARKANSAS WATER

I, do hereby authorize any state's Office of Driver Services to release my traffic violation record to Central Arkansas Water. This release shall remain in full force and effect until written notice of withdrawal is filed by me.

Arkansas Driver's License #

Have you had a driver's license in any other state within the past 3 years? Yes No

If Yes, list all states and license numbers you have had in the past 3 years below:

Driver's License # State

Driver's License # State

Signature Date



ADDITIONAL INFORMATION FOR APPLICANTS

GOOD DRIVING RECORD:

You must have and maintain a Good Driving Record for this job. CAW's definition of a good driving record is based on the last three (3) years of driving.

Types of items which may cause an individual **NOT** to have a **good** driving record may include, but are not limited to the following over the **previous three (3) years**:

1. Three (3) or more accidents where you were ticketed.
2. **DWI** (driving while intoxicated or under the influence of drugs or alcohol).
3. Excessive speeding tickets (20 mph over the limit) along with any other tickets or violations.
4. Hit and Run – leaving the scene of an accident.
5. Ticketed for Reckless, Negligent, or Careless driving along with any other tickets or violations.

We **cannot** hire people who **do not** have a **Good Driving Record** when the job requires a Good Driving Record.

SAFETY SENSITIVE INFORMATION

CAW has a vital interest in providing for the safety and well-being of all employees and the public while maintaining efficiency and productivity in all its operations. In fulfillment of its responsibilities, CAW is committed to maintaining a drug-free and alcohol-free workplace, including but not limited to the use of Illegal Drugs and the misuse or illegal use of Legal Drugs. Several CAW positions are designated as Safety Sensitive. Posting Notices will state, "Safety Sensitive: YES" and the following information will be included within the job description:

This is a safety sensitive position due to utility driving requirements or job responsibilities which include safety-sensitive tasks that require performing duties fraught with risk of injury to others where even a momentary lapse of attention may have grave and disastrous consequences.

Individuals applying for a Safety Sensitive position will be required to pass a pre-employment drug screening and be subject to DOT or NonDOT random screening requirements for drug and alcohol screening during employment.

An internal or external applicant for a Safety-Sensitive Position who is issued a Registry ID Card by the State of Arkansas for use of medical marijuana must disclose such use upon his or her submittal to CAW of an application for the position. An applicant with a Registry ID Card will be disqualified from Safety-Sensitive positions but will be considered eligible to apply for other available positions that are not Safety-Sensitive or may become eligible for Safety Sensitive positions once the applicant is no longer a user of medical marijuana.

