

**EMPLOYMENT OPPORTUNITY
OFFICE MANAGER
UPPER COUNTRY WATER - ALTAMONT, UTAH**

Looking for a reliable, motivated person for potential of long term employment as an Office Manager for Upper Country Water.

Applicant must have a personality that works well dealing with the public and representing District policy, good understanding of word processing, financial and auditing practices. We use the Pelorus Method comprehensive accounting software system that is geared for local governments. Software training will be provided.

Graduate from an accredited high school or equivalent, with additional consideration of extended schooling or experience in related field.

Successful applicant will be offered hourly wage upon hire, with qualification of benefits (Personal Leave Time-PLT, Health/Dental Insurance, State Retirement) discussed at interview.

Must be bondable through the state (may include a background check and drug screen).

Example of Office Manager Duties:

- ◆ Assist residents of Upper Country Water in a congenial and professional manner with customer service, receipting payments, service requests, answering questions and explaining District policies.
- ◆ Process payments and balance daily deposits.
- ◆ Input of data into the computer system for preparation and process of monthly meter readings for billings. Print and sort billing cards for mailing.
- ◆ Reconciliation of monthly records.
- ◆ Responsible for receipting of revenue and managing General Ledger expenses of the District.
- ◆ Work under the direction of the board. Oversee training of the board as required by the State Auditors Office.
- ◆ Prepare packets for monthly board meeting and deliver to board members. Attend monthly board meetings and report as assigned. Some evening hours will be expected.
- ◆ Assist in the preparation of yearly budget, prepare monthly and quarterly financial reports for presenting to the board.
- ◆ Yearly completion of training and certification for Records Management and G.R.A.M.A.
- ◆ Maintain compliance with State and Federal financial reporting requirements.
- ◆ Prepare and submit Federal/State monthly, quarterly and yearly reports.
- ◆ Be familiar and compliant with Utah Code sections governing local and special districts.
- ◆ When assigned, represent UCW at county and state meetings, including training, preparation and proposals for grants and funding.
- ◆ Work with Finance Committee to comply with State Risk Management requirements.
- ◆ Responsible for the maintenance of files, records and finances. Including preparation of documents and records for annual audit.
- ◆ Update the District website.
- ◆ Responsible for the maintenance and updating of policies.
- ◆ Maintain a good working relationship with County employees and elected officials essential for District business.
- ◆ Prepare legal and other public notices as required by Utah Code.
- ◆ Submit notices and files to Utah Public Notice Website and Transparent Utah as required.
- ◆ Perform other routine office duties including use of office equipment.

Upper Country Water - Office Manager

EMPLOYMENT / JOB APPLICATION

PERSONAL INFORMATION

FULL NAME: _____ DATE: _____
First Middle Last

ADDRESS: _____
Street Address Apt/Suite
City State Zip Code

E-MAIL: _____ PHONE: _____

SOCIAL SECURITY NUMBER (SSN): _____ - _____ - _____

DATE AVAILABLE: _____ DESIRED PAY: \$ _____ HOUR SALARY

POSITION APPLIED FOR: _____

EMPLOYMENT DESIRED: FULL-TIME PART-TIME SEASONAL

EMPLOYMENT ELIGIBILITY

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S.? YES NO*

HAVE YOU EVER WORKED FOR THIS EMPLOYER? YES* NO

*IF YES, WRITE THE START AND END DATES: _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES* NO

*IF YES, PLEASE EXPLAIN: _____

EDUCATION

HIGH SCHOOL: _____ CITY / STATE: _____

FROM: _____ TO: _____

GRADUATE? YES NO DIPLOMA: _____

COLLEGE: _____ CITY / STATE: _____

FROM: _____ TO: _____

GRADUATE? YES NO DEGREE: _____

OTHER: _____ CITY / STATE: _____



FROM: _____ TO: _____

DEGREE/CERTIFICATION: _____

OTHER: _____ CITY / STATE: _____

FROM: _____ TO: _____

DEGREE/CERTIFICATION: _____

PREVIOUS EMPLOYMENT

EMPLOYER 1: _____
Company / Individual

E-MAIL: _____ PHONE: _____

ADDRESS: _____
Street Address Apt/Suite

City State Zip Code

STARTING PAY: \$ _____ HOUR SALARY ENDING PAY: \$ _____ HOUR SALARY

JOB TITLE: _____ RESPONSIBILITIES: _____

FROM: _____ TO: _____

REASON FOR LEAVING: _____

EMPLOYER 2: _____
Company / Individual

E-MAIL: _____ PHONE: _____

ADDRESS: _____
Street Address Apt/Suite

City State Zip Code

STARTING PAY: \$ _____ HOUR SALARY ENDING PAY: \$ _____ HOUR SALARY

JOB TITLE: _____ RESPONSIBILITIES: _____

FROM: _____ TO: _____

REASON FOR LEAVING: _____

EMPLOYER 3: _____
Company / Individual



E-MAIL: _____ PHONE: _____

ADDRESS: _____
Street Address Apt/Suite

City State Zip Code

STARTING PAY: \$ _____ HOUR SALARY ENDING PAY: \$ _____ HOUR SALARY

JOB TITLE: _____ RESPONSIBILITIES: _____

FROM: _____ TO: _____

REASON FOR LEAVING: _____

REFERENCES
(PROFESSIONAL ONLY)

FULL NAME: _____ RELATIONSHIP: _____
First Last

COMPANY: _____ TITLE: _____

E-MAIL: _____ PHONE: _____

FULL NAME: _____ RELATIONSHIP: _____
First Last

COMPANY: _____ TITLE: _____

E-MAIL: _____ PHONE: _____

FULL NAME: _____ RELATIONSHIP: _____
First Last

COMPANY: _____ TITLE: _____

E-MAIL: _____ PHONE: _____

MILITARY SERVICE

ARE YOU A VETERAN? YES NO

BRANCH: _____ RANK AT DISCHARGE: _____

FROM: _____ TO: _____



TYPE OF DISCHARGE: _____

IF NOT HONORABLE, PLEASE EXPLAIN: _____

BACKGROUND CHECK CONSENT

IF ASKED, ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK? YES NO

DISCLAIMER

Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.

Please complete each section EVEN IF you decide to attach a resume.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

SIGNATURE _____ **DATE** _____

PRINT NAME _____

AT-WILL EMPLOYMENT

The relationship between you and Upper Country Water, is referred to as "employment at will." This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or Upper Country Water. No representative of Upper Country Water has authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is "at will," and you acknowledge that no oral or written statements or representations regarding your employment can alter your "at will" employment status, except for a written statement signed by you and the Board Chairman at the direction of the Board of Trustees of Upper Country Water.

APPLICANTS SIGNATURE _____ **DATE** _____



I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: _____ Date: _____