



## **HELP WANTED**

Broadwater County is seeking a Short-Term Equipment Operator I for the Road Department. The successful candidate must possess a valid Montana Driver's License with a CDL endorsement and be able to pass a background check. The person in this position will be operating light trucks, tractors, mowers, trimmers, brush cutters, and all similar equipment in various assignments. Manual labor tasks include culvert cleaning, clearing roadside drainage areas, pothole patching, digging holes and ditches, fencing, trimming and cutting trees and shrubs, traffic control, and related activities. Starting wage is \$14 - \$19 per hour, depending on experience. Full job description and application may be picked up in the Accounting Office at the Broadwater County Courthouse; 515 Broadway; Townsend, MT 59644. Requests and completed applications can also be emailed to [mbeebe@co.broadwater.mt.us](mailto:mbeebe@co.broadwater.mt.us). Deadline is 5:00 PM August 10, 2018, or until position is filled.

**BROADWATER COUNTY**  
**Job Description**

**CLASS TITLE:** Equipment Operator I

**DEPARTMENT:** Road Department

**ACCOUNTABLE TO:** Road Foreman

**PRIMARY OBJECTIVE OF POSITION:** Under general and occasional direct supervision, performs a variety of a laborer and semi-skilled tasks in the maintenance, construction, and repair of road and bridge facilities; operates light maintenance equipment. Work varies little, requiring limited judgment within prescribed standards and procedures.

**ESSENTIAL JOB FUNCTIONS:**

- Must possess a valid Montana Operator's License;
- Physical involvement includes bending, stooping, walking, crawling, getting in and out of vehicles or equipment, and may involve lifting up to 100#s (greater with assistance);
- Work is generally performed in uncontrollable physical conditions in which extreme noise, pollution, fumes, dust, and combustible materials, chemicals, heat or cold, and dampness are encountered.

**MAJOR AREAS OF ACCOUNTABILITY AND PERFORMANCE:**

- Operates light trucks, tractors, mowers, trimmers, brush cutters, and all similar equipment in various assignments;
- Uses a variety of hand and power tools and performs the duties of laborer as required;
- Checks tires, oil, lubricant, water levels, lights, fuel, and makes minor repairs to equipment operated;
- Provides manual labor in culvert cleaning, clearing roadside drainage areas, pothole patching, digging holes and ditches, fencing, trimming and cutting trees and shrubs, traffic control, and related activities;
- Performs various tasks such as sign repair, carpentry, jack hammering, painting, erosion control, yard maintenance, weed control, cleaning of all shop and building areas as needed;
- Prepares minimal records of own activities;
- Uses equipment requiring care to assure against breakdown or deterioration;
- Contacts with the public are infrequent and incidental to performance of duties;
- Performs related duties as may be assigned;

**SUPERVISION - RESPONSIBILITY FOR WORK OF OTHERS:** None.

**CLASS TITLE:** Equipment Operator I

**EDUCATION, TRAINING, AND EXPERIENCE REQUIREMENTS:**

- High school graduation or its equivalent;
- Some work experience in the construction and maintenance preferred.
- Completion of Flagger Certification, First Aid/CPR, and Work Zone Safety training/accreditations within six (6) months of hire:
- Must possess a valid Montana Operators License;

**EXAMPLES OF PERFORMANCE CRITERIA AND QUALIFICATIONS:**

- Assigned tasks are performed and completed properly and efficiently;
- Assigned equipment is maintained, repaired, and operated safely;
- Follows oral and written instructions;
- Establishes and maintains effective working relationship with supervisors, other employees, and the public.
- Performs other tasks as may be assigned.

**Reasonable accommodations may be made to enable individuals with disabilities to perform any non-essential job function.**

Written 8-22-2106

**BROADWATER COUNTY  
EMPLOYMENT APPLICATION  
AN EQUAL OPPORTUNITY EMPLOYER**

The information contained on this form is sought in good faith.  
It will not be used in any way to discriminate against any applicant for employment in violation of state and federal law.

**IMPORTANT:** Please type or print in ink. You may respond to sections 4 through 7 on separate sheets of paper if all relevant blocks are completed and the same format is followed. On each sheet write your name and job title for which you are applying. You may submit a legible photocopied application. If you photocopy your application, leave sections 1, 2, and 3 blank and complete these sections each time you apply. You must sign and date in ink each application you submit. **LATE, INCOMPLETE or UNSIGNED applications will not be considered.**

**PLEASE READ THE JOB VACANCY ANNOUNCEMENT CAREFULLY TO FIND:** (a) what attachments must be submitted (supplement questions, transcript, Employment Preference Form, etc.); (b) where to submit your application; (C) the required special qualifications or licenses; and (d) the closing date for receipt of applications. An application tailored to the position is to your advantage.

Under state and federal law, qualified applicants with disabilities are entitled to **reasonable accommodations**. Modifications or adjustments may be provided to assist applicants to compete in the recruitment and selection process, to perform the essential duties of the job or to enjoy equal benefits and privileges of employment available to other employees. An applicant must request an accommodation when needed.

**Employment Preference:** The Veterans' Employment Preference Act and the Persons with Disabilities Employment Preference Act provide preference in public employment for certain military veterans and people with disabilities or their eligible relatives. An applicant claiming employment preference must complete an Employment Preference Form, available through your local Montana Job Service. The applicant must indicate at the bottom of page one of this application form that the necessary documentation is attached. Contact your local Montana Vocational Rehabilitation Services Office (Department of Public Health and Human Services) for details on obtaining persons with disabilities preference certification. For more information, contact your local Job Service.

1. Name \_\_\_\_\_  
                                Last                                First                                MI

2. What position are you applying for?  
(Please see Job Vacancy Announcement.)

Social Security No. \_\_\_\_\_

Department \_\_\_\_\_

Address \_\_\_\_\_  
                                Street

Position Title \_\_\_\_\_

\_\_\_\_\_ City                                State                                Zip

Phone No. \_\_\_\_\_  
                                Work                                Home

Job Location \_\_\_\_\_

3. My signature below certifies that all information on this and all attached pages (checked below) are true, correct and complete to the best of my knowledge and contain no willful falsifications or misrepresentations. Falsifications or misrepresentations may disqualify me from consideration for employment with the County or, if hired, may be grounds for termination at a later date. Employers may be contacted as references. In the spaces below, I have checked attachments, including those required in the job announcement.

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Responses to Supplement Questions        | <input type="checkbox"/> Transcript        | <input type="checkbox"/> Typing/Ten-key Certification     |
| <input type="checkbox"/> Employment Preference Form/Documentation | <input checked="" type="checkbox"/> Résumé | <input type="checkbox"/> Additional Employment Experience |
| <input type="checkbox"/> Other (please specify) _____             |  |   |

SIGNATURE: \_\_\_\_\_ DATE SIGNED: \_\_\_\_\_



7. **EXPERIENCE:** List your work and/or volunteer experience with emphasis on experience that is relevant to the position for which you are applying. **Begin with your present or most recent experience.** Include military service that would help you qualify. You may continue this section on a separate sheet of paper if all the same format is followed. Include your name and the job title for which you are applying on each sheet. *This information must be completed even if a resume is submitted.*

**Notice to applicants:** Information that you provide on this application is subject to verification. Previous employers may be contacted as references.

Do you want to be informed before we contact your present employer?      Yes      No

*Name & Complete Address of Employer*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your Job Title \_\_\_\_\_

Type of Business \_\_\_\_\_ Dates Employed \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_

Immediate Supervisor(s) \_\_\_\_\_ Phone No. \_\_\_\_\_

Avg. Hrs. Per Week \_\_\_\_\_ Total Time Employed \_\_\_\_\_ Yrs/Mo \_\_\_\_\_  Full-Time  Part-Time  Volunteer

Describe your duties, including knowledge, skills, abilities required, employees supervised, and accomplishments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

*Name & Complete Address of Employer*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your Job Title \_\_\_\_\_

Type of Business \_\_\_\_\_ Dates Employed \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_

Immediate Supervisor(s) \_\_\_\_\_ Phone No. \_\_\_\_\_

Avg. Hrs. Per Week \_\_\_\_\_ Total Time Employed \_\_\_\_\_ Yrs/Mo \_\_\_\_\_  Full-Time  Part-Time  Volunteer

Describe your duties, including knowledge, skills, abilities required, employees supervised, and accomplishments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

(EXPERIENCE - continued from item 7...)

*Name & Complete Address of Employer*

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Your Job Title \_\_\_\_\_

Type of Business \_\_\_\_\_ Dates Employed \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_

Immediate Supervisor(s) \_\_\_\_\_ Phone No. \_\_\_\_\_

Avg. Hrs. Per Week \_\_\_\_\_ Total Time Employed \_\_\_\_\_ Yrs/Mo \_\_\_\_\_  Full-Time  Part-Time  Volunteer

Describe your duties, including knowledge, skills, abilities required, employees supervised, and accomplishments:

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Reason for Leaving: \_\_\_\_\_

*Name & Complete Address of Employer*

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Your Job Title \_\_\_\_\_

Type of Business \_\_\_\_\_ Dates Employed \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_

Immediate Supervisor(s) \_\_\_\_\_ Phone No. \_\_\_\_\_

Avg. Hrs. Per Week \_\_\_\_\_ Total Time Employed \_\_\_\_\_ Yrs/Mo \_\_\_\_\_  Full-Time  Part-Time  Volunteer

Describe your duties, including knowledge, skills, abilities required, employees supervised, and accomplishments:

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Reason for Leaving: \_\_\_\_\_

~~—READ CAREFULLY—~~  
Do Not Write On This Page

Please make sure all required information is included (see job vacancy announcement).

1. Did you sign and date your application?
2. Have you read the job announcement to see what attachments must be submitted?
3. Have you checked boxes in Section 3 to indicate what attachments you have included?
4. Did you indicate the specific Position Title and Position Number in Section 2?
5. Did you include a complete address for each employer listed in Section 7?
6. If you are claiming Veterans Employment Preference or Persons with Disabilities Employment Preference, have you completed and attached the Employment Preference Form and Documentation?
7. Did you attach all the application materials required by the vacancy announcement?