



City of Stevenson Public Works Department

(509)427-5970

7121 E Loop Road, PO Box 371
Stevenson, Washington 98648

EMPLOYMENT AGREEMENT

I, _____, understand that as a condition of my continued employment with the City of Stevenson, I must acquire the following certificates by the date indicated:

<u>Certification</u>	<u>Date Required</u>
Commercial Driver's License (6 Months)	_____
Water Distribution Manager I (18 months)	_____
Water Treatment Plant Operator I (18 months)	_____
Waste Water Treatment Plant Operator I (18 months)	_____
Asbestos Cement Pipe Certification (18 months)	_____
Cross Connection Control Specialist (18 Months)	_____
Water Treatment Plant Operator II (5 years)	_____

Failure to obtain these certificates by the date required may result in my termination from employment from the City of Stevenson. I further acknowledge, that for the duration of my employment, I will remain an at will employee and may be terminated without cause.

Employee

Date

Witness

Date