Posting date: 8/9/2023 -9/29/2023 Applications received by: 9/29/2023

Interview dates: 10/2/2023 - 10/13/2023

Potential Start date: 12/4/2023

#### **JOB POSTING**

#### **CITY OF GREENSBURG, INDIANA**

Position: Engineer

Department: Engineering/Mayor
Work schedule: 7:00 am – 4:00 pm, M-F
Status: Full Time, exempt
Starting wage: \$82,000 - \$109,300

The City of Greensburg is seeking a full-time Engineer.

Responsibilities include but are not limited to: Design, inspection and initiation of public works projects, working with Department Heads, preparing budget and capital improvement plans, and providing technical expertise.

Requirements: Bachelor's degree in civil engineering, certification as registered professional engineer in the State of Indiana or ability to obtain.

Complete job description and applications are available online at:

https://www.cityofgreensburg.com/city-services/city-employees/job-opportunities/

Please submit your completed application to Personnel Administrator Julie Nobbe at <a href="mailto:inobbe@greensburgin.gov">inobbe@greensburgin.gov</a> or by mail to 314 W. Washington Street, Greensburg, IN 47240.

Questions can be directed to Julie Nobbe at 812-663-8582 x 3. Thank you in advance for your interest in the position.

# POSITION DESCRIPTION CITY OF GREENSBURG, INDIANA

**POSITION:** Engineer

**DEPARTMENT:** Engineering/Mayor

WORK SCHEDULE: 7:00 a.m. - 4:00 p.m., M-F

JOB CATEGORY: PAT (Professional, Administrative, Technological)

DATE WRITTEN: April 2009 STATUS: Full-time
DATE REVISED: March 2016 FLSA STATUS: Exempt

To perform this position successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed in this document are representative of the knowledge, skill, and/or ability required. The City of Greensburg provides reasonable accommodation to qualified employees and applicants with known disabilities who require accommodation to complete the application process or perform essential functions of the job, unless the accommodation would cause an undue hardship.

Incumbent serves as Engineer for various City departments and utilities, including providing management of transportation and infrastructure projects for the City, such as planning and initiating designs and maintenance of large public works projects.

#### **DUTIES**:

Designs and inspects public works projects, including consulting on development of projects while working closely with other Department Heads.

Oversees maintenance of relevant city records, such as city maps, traffic inventory, accident maps, and GIS. Reviews and assists in changes of city zoning and planning ordinances, standards, and specifications.

Reviews planned improvements including plats, subdivisions, and commercial site plans.

Provides technical expertise in meetings and work sessions for other city departments, boards, commissions and/or private developers.

Reviews applications for permits for street cuts, driveways, sidewalks, and construction.

Prepares budget and capital improvement plans for the department.

Receives citizens concerns/complaints and works with respective Department Head to find resolution to valid concerns/complaints.

Initiates public works projects based on street plans, storm sewer plans, accident data, citizen demand and private/public development plans. Manages public works projects from initiation to completion, including preliminary design, final design and specification, and right-of-way land acquisition and construction.

Perform related duties as assigned.

#### I. JOB REQUIREMENTS:

Bachelor's degree in civil engineering with previous experience in engineering design, including supervising and experience with federal-aid funding. Construction experience strongly preferred.

Possession of or ability to obtain certification as registered professional engineer in the State of Indiana.

Knowledge and experience with transportation, water distribution, and storm and sanitary sewer systems.

Knowledge and experience with drainage ordinances, hydraulic engineering, and storm water calculations.

Ability to effectively communicate orally and in writing and work with city leaders, design professionals, contractors, department heads and the general public to meet department and project deadlines.

Ability to analyze and review plans of proposed subdivisions, industrial developments, site plans and drainage plans and determine if they meet city standards.

Ability to comply with all employer and Department personnel policies and work rules, including, but not limited to, attendance, safety, drug-free workplace, and personal conduct.

Ability to provide public access to or maintain confidentiality of Department information and records according to state requirements.

Ability to understand, memorize, retain, and carry out written or oral instructions and present findings in oral or written form.

Ability to work alone with minimum supervision and with others in a team environment.

Ability to occasionally work extended, weekend and/or evening hours.

Ability to serve on 24-hour call and respond swiftly, rationally and decisively to emergency situations.

Possession of a valid Indiana driver's license and a demonstrated safe driving record.

#### II. DIFFICULTY OF WORK:

Incumbent performs a wide variety of duties which are broad in scope and impact, and require consideration of complex variables. Independent judgment is often necessary in adapting practices and procedures to maximize effective operations, meet Department objectives, and ensure compliance with local, state and federal requirements.

#### III. RESPONSIBILITY:

Incumbent performs administrative and supervisory functions according to Department goals and objectives and standard policies and procedures, referring unusual and/or unprecedented situations to supervisor at incumbent's discretion. Work is periodically reviewed for compliance with legal requirements and appropriate supervision or direction of assigned operations.

#### IV. PERSONAL WORK RELATIONSHIPS:

Incumbent maintains frequent contact with co-workers, Mayor, Board of Public Works and Safety, other City departments, vendors and the public for purposes of exchanging information, explaining/interpreting policies and procedures, coordinating operations, and supervising and directing personnel.

Incumbent reports directly to the Mayor.

#### V. PHYSICAL EFFORT AND WORK ENVIRNOMENT:

Incumbent performs duties in a standard office environment, vehicle and/or occasionally outdoors, involving lifting/carrying objects weighing over 50 pounds, pushing/pulling objects, sitting/walking at will, standing/walking for long periods, climbing ladders/stairs, crouching/kneeling, bending, handling/grasping/fingering objects, close/far vision, hearing sounds/communications, and speaking clearly. Incumbent is exposed to normal hazards associated with constructions sites, equipment, machinery, traffic, noise, dirt, dust, vehicle and paint fumes, extreme temperatures and inclement weather. Safety precautions must be followed at all times to avoid injury to self and others.

Incumbent occasionally works extended, evening and/or weekend hours, and serves on 24-hour call for emergency situations.

#### APPLICANT/EMPLOYEE ACKNOWLEDGEMENT

The job description for the position of Engineer for the City of Greensburg describes the duties and responsibilities for employment in this position. I acknowledge that I have received this job description, and understand that it is not a contract of employment. I am responsible for reading this job description and complying with all job duties, requirements and responsibilities contained herein, and any subsequent revisions.

Is there anything that would keep you from meet Yes No	ing the job duties and requirements as outlined?
Applicant/Employee signature	Date
Print or Type Name	

### **APPLICATION FOR EMPLOYMENT**

## City of Greensburg, Indiana

an Equal Opportunity Employer

The City of Greensburg, Indiana, does not discriminate on the basis of race, color, gender, national origin, age, religion, or disability, in employment or the provision of services.

Please type or print respon	nses to <u>all</u> questions on the a	application form. Any	application not completed in		
its entirety will be <u>disqual</u>	<u>ified</u> .				
Position sought					
Last name	t name First name				
Middle initial For	mer name(s)				
Address		City/state/zip			
Phone	Are you at least	18 years of age? Yes:	No:		
Applicants for Police Dep	artment: Are you at least 2	21 years of age? Yes:	No:		
Are you interested in:	Full-time work?	'es No	-		
	Part-time work?	'es No	-		
	Temporary/Seasonal wo	ork? Yes No			
	Affordable Care Act Fu	ll-time? Yes	No		
Date available to start wor	·k				
*******	********	*******	********		
EMI	PLOYMENT HISTORY A	ND WORK EXPER	IENCE		
• •	ory and work experience du	0 1	e years, beginning with your or disqualification.		
If currently unemployed,	check here and skip to	o Previous employer	below.		
• Current employer					
Address		City/state/zip			
Phone ()	Hire date	Job tit	le		
Beginning salary	per	Current salary _	per		
Supervisor	T;	tla			

Why do you want to leave?  May we contact your current employer? Yes: No: If no, please explain w Previous employer Phone (	Work phone					
Why do you want to leave?  May we contact your current employer? Yes: No: If no, please explain w  Previous employer Phone ( ) Address City/state/zip Dates employed Job title Beginning salary per Ending salary per Supervisor Title Work phone Briefly describe the work you did, such as duties, responsibilities, equipment you of promotions:  Reason for leaving: May we contact this employer? Yes: No: If no, please explain why:  Previous employer Phone ( ) Address City/state/zip Dates employed Job title Beginning salary per Ending salary per	Briefly describe the work y	ou do, suc	ch as duties,	responsibilities,	equipment	you o
May we contact your current employer? Yes: No: If no, please explain we previous employer Phone (	promotions:					
Previous employer	Why do you want to leave?					
Phone ( )	May we contact your current	employer?	Yes:	No: If n	o, please exp	lain w
Address	Previous employer					
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Dates employed Job title	Address					
Beginning salary per Ending salary per Supervisor Title Work phone Briefly describe the work you did, such as duties, responsibilities, equipment you of promotions:  Reason for leaving:  May we contact this employer? Yes: No: If no, please explain why:  Previous employer Phone ( ) Address City/state/zip	City/state/zip					
Supervisor Title  Work phone Briefly describe the work you did, such as duties, responsibilities, equipment you of promotions:  Reason for leaving: May we contact this employer? Yes: No: If no, please explain why:  Previous employer  Phone ( ) Address City/state/zip Dates employed Job title Beginning salary per Ending salary per	Dates employed		_ Job title			
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Briefly describe the work you did, such as duties, responsibilities, equipment you of promotions:  Reason for leaving:  May we contact this employer? Yes: No: If no, please explain why:  Previous employer  Phone ( )  Address  City/state/zip  Dates employed Job title  Beginning salary per Ending salary per	Supervisor		Title			-
Previous employerPhone ( ) Address City/state/zip Job title Beginning salary per Ending salary per Ending salary per Ending salary per	Work phone					
Reason for leaving:  May we contact this employer? Yes: No: If no, please explain why:  Previous employer  Phone ( )  Address  City/state/zip  Dates employed Job title  Beginning salary per Ending salary per	Briefly describe the work y	ou did, su	ch as duties,	responsibilities,	equipment	you o
May we contact this employer? Yes: No: If no, please explain why:  Previous employer  Phone ( )  Address  City/state/zip  Dates employed Job title  Beginning salary per Ending salary per	promotions:					
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Previous employer Phone ( ) Address City/state/zip Dates employed Job title Beginning salary per Ending salary per	Reason for leaving:					
Phone ( )	May we contact this employe	r? Yes:	No:	If no, please	explain why:	:
Phone ( )						
Address City/state/zip  Dates employed Job title  Beginning salary per Ending salary per	Previous employer					
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Dates employed Job title  Beginning salary per Ending salary per	Address					
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manations.			
promotions:			
Reason for leaving:			
May we contact this employer? Yes:	No: If no	o, please explain why:	
Previous employer			
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Address			
City/state/zip			
Dates employed	_ Job title		
Beginning salary per	Ending salary	per	
Supervisor	Title		
Work phone			
Briefly describe the work you did, such	ch as duties, respon	sibilities, equipment you ope	rate
promotions:			
Reason for leaving:			
May we contact this employer? Yes:	No: If no	o, please explain why:	
ou had additional employers within the las	t five years, attach ac	dditional pages as needed.	
d explain periods of unemployment in the	past five years:		
to Reason:			
to Reason:			
	Reason for leaving:  May we contact this employer? Yes:  Previous employer  Phone ( )  Address  City/state/zip  Dates employed  Beginning salary per  Supervisor  Work phone  Briefly describe the work you did, such promotions:  Reason for leaving:  May we contact this employer? Yes:  but had additional employers within the last dexplain periods of unemployment in the to Reason:	Reason for leaving:  May we contact this employer? Yes: No: If not previous employer	Reason for leaving:  May we contact this employer? Yes: No: If no, please explain why:  Previous employer Phone ( ) Address City/state/zip Dates employed Job title Beginning salary per Ending salary per Supervisor Title Work phone Briefly describe the work you did, such as duties, responsibilities, equipment you open promotions:  Reason for leaving: May we contact this employer? Yes: No: If no, please explain why:  au had additional employers within the last five years, attach additional pages as needed.  de explain periods of unemployment in the past five years: to Reason:

#### **EDUCATION AND TRAINING**

This section is intended to give the employer information about education and training you have completed, and to describe your skills, knowledge and abilities to perform the duties of the position.

Dip Act	ddressCity/state/zip iploma? Yes No ctivities, awards (You may exclude any which indicate race, color, religion, gender, age, na sability)	
Col	ollege(s) or Trade School(s) attended Attach additional pages as needed.	
	Name	
	Dates attended to	
	Address City/state/zip	
	Degree(s)	
	Major/minor course(s) of study	
•	Name	
	Dates attended to	
	Address City/state/zip	
	Degree(s)	
	Major/minor course(s) of study	
•	Activities, awards (You may exclude any which indicate race, color, religion, gender, age origin, or disability.)	?, national
•	Seminars/workshops, special awards, articles you have published, other information that r to the position you are seeking:	may be relevant

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

### **MILITARY HISTORY AND STATUS**

If you have never served	in the military on acti	ve duty, che	eck here	and	skip to the next
section. Military Branch	Dates of Service	<u>Highe</u>	st Rank Attair	<u>ied</u>	Rank at Separation
Type of Discharge					
Citations/awards received	d				
*******	******	*******	********	*****	*******
	PROFESSIONAL O	OR SPECIA	LIZED TRA	INING	
Specialized training					
Professional/special licer	se(s) or certificate(s):				
State Iss	ued By D	ate Issued	Expiration	<u>Type</u>	<u>License #</u>
Have you had any license	e suspended, revoked	or terminate	ed? Yes	_ No	If yes, explain:
********	*******	******	******	******	********
	PROFESSIO	NAL AFF	<u>ILIATIONS</u>		
List current or previous a	ffiliations/organizations	ons and relat	ed offices/pos	itions.	
Organization Name	Address		<u>Phone</u>	Offices	s/Positions

•Use the following space to describe other training, education, skills, abilities, hobbies, volunteer work				
or other information that may be helpful in evaluating your application. (You may exclude any which				
indicate race, color, religion, gender, age, national origin or disability.)				
*****************************				
PERSONAL INFORMATION				
Do you have any commitments which might interfere with or adversely affect your employment with us				
such as a second job or school? Yes No If yes, please explain:				
• Have you ever been convicted of a felony that has not been expunged or sealed?				
Yes No If yes, please explain:				
• Do you have an arrest record that has not been expunged or sealed? Yes No				
If yes, please explain:				
• Are you currently required to register as a sex offender in this or any other jurisdiction?				
Yes No If yes, please explain (including jurisdiction of registry):				

• List three references who are <u>not</u> related to you a	and are <u>not</u> former employers or supervisors:
o Name	Phone
Address	
City/state/zip	_
Number of years known	
o Name	Phone
Address	
City/state/zip	_
Number of years known	
o Name	Phone
Address	
City/state/zip	_
Number of years known	
APPLICANT ( Read each of the following paragraphs carefully.	CERTIFICATION  Indicate your understanding of, and consent to, the
contents and conditions of each paragraph by sign have any questions regarding these paragraphs, con	ing your initials at the end of each paragraph. If you ntact the employer <u>before</u> initialing.
	Initials:
psychological examinations that the employer dee	by be hired conditional on passing any medical and/or ems necessary to determine my ability to perform the d and accept that this may include drug, alcohol or
	Initials:
• I understand that it may be necessary for me to the employer to obtain information from my curren	approve and sign any waivers necessary in order for and former employers.
1 3	Initials:

I understand and accept that if any information required in this application is found to be falsified of tentionally excluded, my application may be disqualified from further consideration. I further derstand and accept that, if I am employed by the employer, I may be subject to disciplinary action cluding termination, if any information required by this application has been falsified or intentional accluded.				
	Initials:			
• I solemnly swear that all of the information furnished in this en and complete to the best of my knowledge. I authorize investigate application. I understand that my misrepresentations or falsification to withdrawal of an employment offer or termination following	ation of all statements contained in this ation of the information provided may			
	Initials:			
By submitting this document, I hereby agree that I shall execute employment medical examination and drug testing consent requestion with the employer will be jeopardized if I engage is alcohol abuse.	uirements. I recognize that my future			
Applicant's signature	Date			
The following sections to be completed by Police Department ap	oplicants only:			
• I understand that the employer provides Police service on a sex per day service, and therefore, if employed by the Police Departments or night shifts, including weekends.	• •			
	Initials:			
• I understand that if I am hired as a sworn officer on the Polic complete required training and courses specified and be cert Academy.				
reading.	Initials:			