

Mentoring Program

YES, I am interested in joining the Nebraska Section AWWA Mentoring Program. Please sign me up in the following categorie(s):

- | | |
|--|--|
| <input type="checkbox"/> Chlorination/Disinfection; Chemical Feed Maintenance & Repair | |
| <input type="checkbox"/> Consumer Confidence Reports | |
| <input type="checkbox"/> Electrical & Motor Maintenance | |
| <input type="checkbox"/> Equipment Loan | <input type="checkbox"/> Planning, Short- and Long-Range |
| <input type="checkbox"/> Pump Maintenance | <input type="checkbox"/> Security |
| <input type="checkbox"/> Small Systems | <input type="checkbox"/> Source Water Protection |
| <input type="checkbox"/> Water Conservation | <input type="checkbox"/> Water Distribution |
| <input type="checkbox"/> Water Production | <input type="checkbox"/> Water Supply |
| <input type="checkbox"/> Water Treatment | <input type="checkbox"/> Websites |

New Categories:

- | | |
|---|---|
| <input type="checkbox"/> Storage | <input type="checkbox"/> Cross-Connection |
| <input type="checkbox"/> Emergency Response | |

Fill in the following information. Please print/type:

Name _____

Organization _____

Phone _____ FAX _____

e-mail _____

Return this form to:

David Jundt

Nebraska Health and Human Services

304 North 5th St Suite C

Norfolk, NE 68701-4093

FAX: 402.370.3493

AND fax to Mari Matulka, 402.449.8166 for posting on the Nebraska Section AWWA website, www.awwaneb.org

Thank you.