



## QUARTER CENTURY OPERATOR CLUB

### Eligibility Requirements

The Quarter Century Operator Club recognizes operators of wastewater treatment facilities for their service and dedication in a difficult and dangerous profession. The Club was created under the sponsorship of **Frank Woodbury Jones**, who served as the Club's first registrar.

#### **Eligibility Requirements:**

- Member of WEF for a minimum of five consecutive years immediately preceding application.
- Significant, full-time participant in the water environment profession for a minimum of 25 years, 10 years of which must have been in active participation in the day-to-day collections, maintenance, operations, laboratory, or management of a wastewater transportation or treatment facility.
- Completed and signed application.

**Applications Accepted From:** WEF Professional Wastewater Operations Members

*NOTE: Applications must be signed and submitted by the individual applicant.*

The Quarter Century Operator Club (QCOC) application must be submitted at least **12 weeks before the annual conference meeting date.**

#### **E-mail or mail completed and signed application to:**

Water Environment Federation  
Attn: Rebecca Culhane  
601 Wythe Street  
Alexandria, VA 22314  
[rculhane@wef.org](mailto:rculhane@wef.org)  
Ph: 703-684-2400 ext. 7070

#### **Shipping Preference:**

Your plaque will be shipped to and presented by your Member Association (MA) at their annual conference; the Quarter Century Operator Club (QCOC) application must be submitted at least **12 weeks before the annual conference meeting date.** Please reach out to your MA for conference-specific questions.

**Application begins on Page 2**



## QUARTER CENTURY OPERATOR CLUB Application

*All requested information must be provided in order to process the application. Incomplete applications will be returned to the applicant and may result in a delay in approval.*

Are you submitting this application on behalf of yourself or someone else? \_\_\_ Myself / \_\_\_ Someone else

If you are submitting this on behalf of someone else, please provide your contact information below:

Name, Phone Number, and Email:

If you are submitting this on behalf of someone else, is this a surprise to the recipient? \_\_\_ Yes / \_\_\_ No / \_\_\_ N/A

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*(The information listed below should reflect the information for the applicant/recipient of this award)*

WEF Member Association (MA): \_\_\_\_\_

WEF Membership #: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address (No PO Box): \_\_\_\_\_

Phone #: \_\_\_\_\_

Applicant Email: \_\_\_\_\_

***By completing this application, I certify that:***

- *I have been a WEF member for a minimum of five (5) consecutive years.*
- *I have been a full-time participant in the water environment profession for a minimum of twenty-five (25) years.*
- *Ten (10) years of my water environment professional employment has been in the active, day-to-day operations, maintenance, laboratory or management of a water transportation or treatment facility.*

**Please provide a detailed report of the requested points below (continued on page 3):**

**Full Employment history: (provide dates & places of employment including military service or attach resumé):**

**10 year Day-to-Day Experience Description: (Describe the type of facility operated, maintained or managed and provide dates of employment:)**

**Signature (required):** \_\_\_\_\_

**Date:** \_\_\_\_\_

***Additional page for use as needed:***