



NH Drinking Water & Wastewater Managers School

Class of 2027 Program Announcement

The NH Department of Environmental Services (NHDES), the NH Water Pollution Control Association (NHWPCA) and the NH Water Works Association (NHWWA) are pleased to announce the next session of the NH Drinking Water & Wastewater Managers School, for 2027. Application to the program is open to drinking water and to wastewater professionals preparing for future management or supervisory positions, as well as current managers and supervisors who wish to improve their management skills. Course topics include municipal and utilities legal concepts, budgeting, personnel management/team building, communication skills, education and outreach, public information and messaging, and instruction by current NH water and wastewater utility managers. All applicants must complete the 2 forms (Form A and Form B available at: [https://nhwpc.org/NH Drinking Water Wastewater Managers School](https://nhwpc.org/NH_Drinking_Water_Wastewater_Managers_School)) and have them submitted **by December 31, 2026** for consideration. Each applicant will be notified of individual selection results by February 1, 2027.

Program Details

The course is expected to begin in March 2027. Training will be conducted one day per month, March through November, on the **3rd Thursday of each month**, with most classes held in Concord, NH. In addition to this classroom time, there will also be: a utility exchange where candidates will spend a day with the manager of another water utility; time outside of class involved with preparing presentations; and time outside of class performing outreach promoting water utility/environmental concepts. Individuals who complete the course will be awarded 70 training contact hours (7.0 CEUs), approved for NH DW and WW operator certification continuing education credit.

Program Cost

There is no cost to apply. For those accepted into the program, tuition is **\$795 per person**, non-refundable, with full payment due by March 1, 2027. Scholarships may be available through the NHWPCA and NHWWA, please contact NHWWA at info@nhwwa.org or visit the NHWPCA website at www.nhwpc.org to learn more.

To Apply

Candidates simply need to complete **Form A** and have their supervisor complete **Form B**, and ensure that both are submitted to:

NHDES-WWEB, attention: Wade Pelham, PO BOX 95 Concord, NH 03302

or emailed to wade.pelham@des.nh.gov by December 31, 2026.

If you have any questions please contact Wade Pelham, NHDES at (603) 271-2818 or wade.pelham@des.nh.gov. We look forward to receiving your application.



NH DW&WW Managers School Form A. Applicant Information

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Email: _____ Phone: _____

Education Completed (choose all that apply)

High School/GED College Certificate Associates Degree (2 yrs) Bachelor's Degree (4 yrs)

Experience History

Organization Years

Supervisor Phone Email

Description of Duties (attach additional sheets if necessary)

Organization Years

Supervisor Phone Email

Description of Duties (attach additional sheets if necessary)

Applicant Statement

Please attach a typed statement (250 words or less) explaining why you wish to be considered as a candidate for the **Drinking Water & Wastewater Managers School**. Include your full name on your statement.

Applicant Certification

I certify that the above information is accurate. As a candidate I certify that if accepted I will be able to attend all classes which are part of the 2027 Water & Wastewater Managers School. If selected, I understand class tuition is due in full by March 1, 2027 and that payment is non-refundable.

Signature: _____ Date: _____

Please submit completed form by **December 31, 2026** to:
 NHDES-WWEB attention: Wade Pelham PO BOX 95 Concord, NH 03302 or email to wade.pelham@des.nh.gov



NH DW&WW Managers School

Form B. Employer Information

Applicant Information

Full Name: _____

Job Position: _____

Supervisor Information

Full Name: _____ Date: _____
Last First M.I.

Organization: _____

Address: _____
Street Address

City State ZIP Code

Email: _____ Phone: _____

Supervisor Statement

Please attach a typed statement (250 words or less) explaining the reasons you believe the subject applicant would be a good candidate for the **Drinking Water & Wastewater Managers School**, and describe the organizations support for the applicant's participation in the program.

Job Shadow

This program will include one day of job shadowing. During this day the students will spend 7 hours with a manager of another water and/or wastewater facility. The student is expected to learn what a day as a manager is like directly from a manager.

Is your facility willing to host a student for this day of job shadowing?

- YES**, our drinking water facility agrees to host a participant for a day of job shadowing.
- YES**, our wastewater facility agrees to host a participant for a day of job shadowing.
- NO**, we cannot host a participant for a day of job shadowing.

Employer Confirmation

I certify that the above information is accurate. As the employer of the candidate, I also certify that the applicant (if accepted) will be permitted to attend all the classes that are part of the 2027 Water & Wastewater Managers School. It is understood that payment would be due in full by March 1, 2027 and is non-refundable.

Signature: _____ Date: _____

Please submit completed form by **December 31, 2026** to:
 NHDES-WWEB attention: Wade Pelham PO BOX 95 Concord, NH 03302 or email to wade.pelham@des.nh.gov