

Employee Name: \_\_\_\_\_

## **DEPARTMENTS: VARIOUS (\*\*For Facilities see Custodian\*\*)**

# PHYSICAL REQUIREMENTS: GENERAL SERVICE WORKER 1 AND 2 GENERAL SERVICE SUPERVISOR

#### Positions in this class typically require:

- An employee in this class may be required to assist in loading, unloading, and moving of supplies, equipment, and furniture (up to 50 pounds)
- Work also requires exposure to hazardous chemicals and biohazardous material
- Work involves duties using power equipment and requires the use personal protection equipment
- Physical hazards may occur when working with power scrubbers, buffers, waxers, power tools, climbing on ladders, and lifting up to 50 pounds.
- The employee must be willing to work the assigned shift and in all County buildings, including the Jail and the Coroner's office.
- Walking and standing for extended periods,
- Twisting, stooping, bending, reaching (over shoulders, at waist and below waist), and grasping tools.
- Adequate vision and coordination to operate food service and preparation equipment.
- Adequate hearing to sufficient to communicate effectively and respond appropriately.
- Repetitive motions when manually completing required logs/reports.
- Mental alertness, physical strength, coordination, dexterity to ensure safety.
- Exertion of force of up to 50 pounds occasionally, and/or up to 20 pounds frequently and/or 10 pounds constantly to lift/carry/move food service equipment and materials.

Incumbents may be exposed to:

- Dust, chemical fumes, herbicide, insecticides and pesticides.
- Potentially hazardous conditions when driving or maintaining spraying at various locations in a variety of weather conditions.
- Subject to exposure to physical hazards associated with use of food preparation equipment and chemicals commonly used in kitchen sanitation and cleaning.
- Exposed to potentially violent or hostile individuals in volatile and dangerous situations within the facility.

Activity	Never 0%	Inter. 1–10%	Occas. 11-33%	Freq. 34-66%	Cont. 67+%	Further Description
1. Walking			x			Alternates standing and walking when completing job tasks
2. Balance					x	
3. Lifting	-	-	-	-	-	
0-10 lbs.			x			Office supplies, paperwork, and files
11-20 lbs.		x				

#### PHYSICAL AND MENTAL DEMANDS



## **KITSAP COUNTY** 614 Division St. Port Orchard WA 98366

Employee Name: \_\_\_\_\_

21-35 lbs.		x				
36-50 lbs.	x					
50 + lbs.	x	_	-			-
Activity	Never 0%	Inter. 1–10%	Occas. 11-33%	Freq. 34-66%	Cont. 67+%	Further Description
4. Carry	-	-	-	-	-	
0-10 lbs.			x			Office supplies, paperwork, and files
11-20 lbs.		x				
21-35 lbs.		x				
36-50 lbs.	x					
5. Pushing/ Pulling	-	-	-	-	-	
0-10 lbs.		x				File drawers, office equipment, files
11-20 lbs.		x				
21-35 lbs.	x					
36-50 lbs.	x					
6. Climbing		x				May periodically climb stairs
7. Twisting		x				Accessing files, office supplies and equipment
8. Reaching		x				"
9. Grasping		x				Office supplies, equipment, phone
10.Stooping/ Bending		x				To access low filing cabints/shelves
11. Sitting					x	
12.See/Hear/ Speak	-	-	-	-	-	
Sees Detail					x	Documents, computer screen
Color						Files may be color coded



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Disaring				I		1
Discrim.					Х	
Visual						Computer screen
Displays					Х	
Audible						Supervisor's directions &
Signals					Х	phones if applicable
Oral						Supervisor's directions and
Direction					Х	interaction with co-workers
	Never	Inter.	Occas.	Freq.	Cont.	Further
Activity	0%	1–10%	11-33%	34-66%	67+%	Description
13. Working						
Cond/Exp.	-	-	-	-	-	
Uneven						
Ground	x					
Work						
Outside	x					
Work						Office environment
Inside					x	
High					Λ	
Elevations	x					
	^					
Moving	x					
Objects	^					
Slippery Surface	x					
Surface	^					
Wetness	x					
Temp.						
Extremes	х					
Confined						
Spaces	х					
Special						semi-professional attire
Clothing					х	
U						
Vibration	x					
Use of						
Solvents	x					
Use of						
Detergent	x					
Chemical						
Contact	x					
Chemical						
Vapors	x					
Dust or						
Particles		х				
		~				



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### PHYSICIAN TO COMPLETE

**SUMMARY DETERMINATION** (Please check appropriate item)

\_\_\_\_ Worker can fully perform the job with no restrictions as of the date below

\_\_\_\_ Worker requires restrictions to perform the job. The restrictions are described on the Physician's Estimate of Physical Capacities.

Physician Signature

Date

ADDITIONAL COMMENTS: