ADA Essential Functions Worksheet

Dat	te: <u>10/27/</u>	2016						
D	epartment:	DPW Highwa	y Operations					
CI	lass Title:	Sign/Signal Ma	intenance Work	(er				
Ιve	erify that the	e following inform	ation accurately	/ describes th	ie essenti	ial functions of	the job listed.	
1	Tet !	Chlodi	0		Highwa	y Operations N	Manager	
Sı	upervisor S	ignature			Supervi	sor Title (pleas	se print)	
***	******	******	******	******	******	******	******	***
1.	General F	Purpose of the \	Work:					
<u>-</u>		m all work invol right-of-ways.	ving maintena	ince and rep	air of tra	affic signs and	d signals on	
2.	-	ks that are perf	•	•				
De Cla	knockdo traffic sig		nal timing cha epair or replac	nges. Repla ce burned ou	cement o	of undergrou	nd sign nd and overhead ions. Layout and	
	Regular Periodic Duties: Tree and brush trimming, minor repair of highway defects.							_
-	Occasio	nal or Infreque	ent Duties: S	now and Ice	control.			<u> </u>
3.		•					he job: ders, tar kettles,	
4. -	Does the position require the ability to work any shifts and/or day? Specify. Yes, during severe weather events including snow storms, flooding and tornadoes. In addition, called out at any time to respond to traffic signal knockdowns and stop sign knockdowns.							
5.	Physical Demands and Work Conditions: Please complete the attached checklist identifying the physical demands of the job and the work conditions under which the work is performed. Assess the amount of time required to perform those activities or work under the conditions identified. Use the criteria listed below to determine the amount of time each day: Please place an "X" in the column for the criteria.							_
			1. Occasio 2. Frequen 3. Continu	tly	= = =	34 – 66% of	our workday your workday of vour workday	

ACTIVITIES	YES	NO	осс	FREQ	CONT
CITTING			1		
SITTING	X		X		
STANDING	X	ii			X
LIFTING	x				
0 – 20 lbs. (light)	X				X
21 – 50 lbs. (moderate)	X			X	
51 – 100 lbs. (heavy)	X		X		
100 lbs. (very heavy		X			
Lifting from Arm Level			X		
Lifting from Floor Level		l		X	
PUSHING				ļ	
Light objects	X			X	
Medium objects	X			X	
Heavy objects	X		X		
On/off elevator		Х			
Up/down incline	X		Х		
REPETITIVE MOTIONS Type of Motion					
PULLING					
Light objects	X			х	
Medium objects	X			х	
Heavy objects	X		Х		
On/off elevator		Х			
Up/down incline	x		Х		
WALKING					
On smooth surface	х	li .			х
On uneven surface	х	ii		х	
Up/Down Stairs	x		х		
RUNNING		ii			
On smooth surface	x		х		
On uneven surface		Х			
Up/Down Stairs		Х			
CLIMBING					
Stairs	x			Х	
Ladders	X			Х	
Inclines	x		Х		
Scaffolds		X			
AGILITY		Ī			
Balance	X	•••••		•	X

ACTIVITIES	YES	NO	осс	FREQ	CONT
REACHING					
Below shoulder	X			Х	
Above shoulder	X	•••••		х	
TRUNK MOVEMENT					
Rotation	X			х	
Bending forward	Χ			х	
Bending back	Х		х		
Bending to side	X		х		
Bending down	Х			х	
LOW LEVEL WORK					
Crawling	Χ		Х		
Kneeling	X			х	
Squatting	Х			Х	
HAND/FINGER DEXTERITY:					
Fine Finger Movements	Χ			X	
Unilateral	Χ			X	
Bilateral	Χ			X	
Speed is vital	Χ		X		
Hold/manipulate small objects	Х			X	
CARRYING OBJECTS					
On smooth surface	X			х	
On uneven surface	X			х	
Up/down stairs	X			X	
Up ladders or stools	Х			Х	
DRIVING					
Class "D" driver's license needed	X				Х
Commercial Driver's License Needed (specify class <u>A</u>)	Х				х
VISION					
Near vision acuity	X				х
Far vision acuity	Х				Х
Vision – Color Identification	Х				Х
Vision – Depth Identification	Х	Ti .			х
Talking in Person	Х				Х
Talking via Phone	Х			Х	
Hearing in Person	Х				Х
Hearing via Phone	Х			X	
Work Conditions					

ACTIVITIES	YES	NO	осс	FREQ	CONT
			·	ļ	ļ
Inside	X			Х	
Outside	Х				Х
Work with others	Х				Х
Work alone	Х			Х	
Work near others	X				Х
Cramped work space: limits motion	X		Х		
Toxic Chemicals	X		X		
Dusts	X		X		
Vapors / Fumes	X		X		
Heat	X			X	
Cold	X			X	
Noise	X				Х
Vibration	X		X		
Radiation		X			
Computer Screen Use	Χ		X		
Pathogens/blood and body fluids		X			
Respirator Use - Specify	Х		x Dust Mask		
Work Hours					
Regular Overtime Required	x		x		_