

4. Check most appropriate for this job:

	Never	Occasional (1-33%)	Frequent (34-66%)	Constant (67-100%)
Bend	_____	_____	_____	_____
Twist	_____	_____	_____	_____
Crawl	_____	_____	_____	_____
Climb	_____	_____	_____	_____
Overhead Reach	_____	_____	_____	_____
Push/Pull	_____	_____	_____	_____
Drive	_____	_____	_____	_____
A. Hand Functions				
Fine Manipulation	_____	_____	_____	_____
Heavy Grasp	_____	_____	_____	_____
B. Foot Function				
Operation of Foot controls	_____	_____	_____	_____

5. Check most appropriate environment (more than one if needed):

_____ Exposed to Weather _____ Fumes/Dust
_____ Unprotected heights _____ Loud Noise
_____ Inside temperature extremes
_____ Other, Explain: _____

6. Please provide any additional comments or details not listed on this form:

Employer Representative Signature

Date

Work Kare Representative Signature

Date

