



City of Clarksville Essential Function and Job Analysis Form



Job Title	Date
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Short Description	EF CODE
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Physical Requirements Maximum Hours/Day	0	2	4	6	8	Physical Requirements Maximum Hours/Day	0	2	4	6	8
Heavy carrying – 45 lbs +	<input type="checkbox"/>	Heavy lifting – 45 lbs +	<input type="checkbox"/>								
Moderate carrying – 15-44 lbs	<input type="checkbox"/>	Moderate lifting – 15-44 lbs	<input type="checkbox"/>								
Carrying – under 15 lbs	<input type="checkbox"/>	Lifting under 15 lbs	<input type="checkbox"/>								
Straight pulling of objects	<input type="checkbox"/>	Standing	<input type="checkbox"/>								
Pulling hand over hand	<input type="checkbox"/>	Sitting	<input type="checkbox"/>								
Repeated bending / Stooping	<input type="checkbox"/>	Crawling / kneeling	<input type="checkbox"/>								
Reaching above shoulder	<input type="checkbox"/>	Kneeling	<input type="checkbox"/>								
Grasping – one hand	<input type="checkbox"/>	Climbing stairs/ladder	<input type="checkbox"/>								
Grasping – both hands	<input type="checkbox"/>	Pushing	<input type="checkbox"/>								
Walking	<input type="checkbox"/>	Other:	<input type="checkbox"/>								

Environment Requirements	Remarks / Adaptations
Outdoors - all seasons	<input type="checkbox"/>
Exposure to dust / fumes	<input type="checkbox"/>
Exposure to heat / cold	<input type="checkbox"/>
Exposure to water	<input type="checkbox"/>
Exposure to noise	<input type="checkbox"/>
Exposure to vibration	<input type="checkbox"/>

Cognitive Skills	Remarks / Adaptations
Advanced math skills	<input type="checkbox"/>
Basic math skills	<input type="checkbox"/>
Problem solving / Reasoning	<input type="checkbox"/>
Reading technical documents	<input type="checkbox"/>
Reading – newspaper level	<input type="checkbox"/>
Special language skills	<input type="checkbox"/>
Interpersonal speaking	<input type="checkbox"/>
Public speaking	<input type="checkbox"/>
Independent work	<input type="checkbox"/>
Ability to supervise others	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>
Ability to drive (non-CDL)	<input type="checkbox"/>
Ability to drive (CDL)	<input type="checkbox"/>
Use of firearm	<input type="checkbox"/>
Use of power tools	<input type="checkbox"/>
Ability to see objects	<input type="checkbox"/>
Ability to hear speech	<input type="checkbox"/>

Comments: