



12. Continued

Percent of Total Working Time and Essential (E) or Marginal (M) indication	Work Tasks and Duties
<hr/> <p>100%</p>	<p>(Add Additional Pages if Needed)</p>

13. List and explain the contacts the position will have, if any, both within and outside the State Government, as a routine function of your work. Do not list contacts with supervisors, co-workers, and subordinates.

Persons or Organizations	Purpose	How Often	Inside/Outside Virginia Government

**PART III: TO BE COMPLETED BY THE SUPERVISOR**

14. List what you consider to be the qualifications for entry into this position:

A. What knowledge, skills, and abilities should a new employee bring to this position?

B. Special licenses, registration or certification:

C. Education or training (cite major area of study):

D. Level and type of experience:

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**PART IV: SIGNATURE LINES**

15. We understand the above statements, and they are complete to the best of our knowledge.

_____	_____
Employee's Signature (n/a if new position)	Date
_____	_____
Supervisor's Signature	Date

16. Attach an organization chart showing this employee's position within your organizational unit.

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OLD DOMINION UNIVERSITY  
POSITION PHYSICAL REQUIREMENTS  
WORKSHEET

Position Title:

Position Number:

Date:

Supervisor's Title:

Supervisor's Number:

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**Instructions:** Click in the applicable form for type of physical demands, degree of physical demands, visual demands, and physical surroundings and hazards. INDICATE how often it is done (occasionally (O), frequently (F), or constantly (C) by clicking in appropriate box.

**TYPES OF PHYSICAL ACTIVITY (CLICK in the box's for all that apply and INDICATE how often it is done)**

- |  |  |
|--|--|
| <input type="checkbox"/> A. Climbing: Going up or down ladders, stairs, scaffolding, ramps, poles and the like, using feet and legs and/or hands and arms. Body agility is emphasized. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   | <input type="checkbox"/> K. Pulling: Using upper arms and shoulders to exert force in order to draw, drag, haul, or tug objects in a sustained motion. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   |
| <input type="checkbox"/> B. Balancing: Maintaining body equilibrium to prevent falling when walking, standing, or crouching on narrow, slippery, or erratically moving surfaces. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   | <input type="checkbox"/> L. Lifting: Raising objects from a lower to a higher position or moving objects horizontally from position to position. This factor is important if it occurs to a considerable degree and requires the substantial use of the upper arms, shoulders, and back muscles. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> ) |
| <input type="checkbox"/> C. Stooping: Bending body downward and forward by bending at the waist. This factor is important if it occurs in a considerable degree and requires full use of the lower extremities and back muscles. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> ) | <input type="checkbox"/> M. Fingering: Picking, pinching, typing, keyboarding, or otherwise working, primarily with fingers rather than whole hand or arm as in handling. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )  |
| <input type="checkbox"/> D. Kneeling: Bending legs at knee to come to a rest on knee or knees. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   | <input type="checkbox"/> N. Grasping: Applying pressure to an object with the fingers and palm. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )  |
| <input type="checkbox"/> E. Crouching: Bending the body downward and forward by bending leg and spine. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   | <input type="checkbox"/> O. Feeling: Perceiving attributes of objects, such as size, shape, temperature, or texture by touching with skin, particularly that of fingertips. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )  |
| <input type="checkbox"/> F. Crawling: Moving about on hands and knees or hands and feet. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   | <input type="checkbox"/> P. Talking: Expressing or exchanging ideas by means of the spoken word. Those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   |
| <input type="checkbox"/> G. Reaching: Extending hand(s) and arm(s) in any direction. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   | <input type="checkbox"/> Q. Hearing: Ability to receive detailed information through oral communication, and to make fine discriminations in sounds, such as when making fine adjustments on machined parts. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   |
| <input type="checkbox"/> H. Standing: Particularly for sustained periods of time. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )  | <input type="checkbox"/> R. Repetitive motions: Substantial movements (motions) of the wrists, hand, and/or fingers. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   |
| <input type="checkbox"/> I. Walking: Moving about on foot to accomplish tasks. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   |  |
| <input type="checkbox"/> J. Pushing: Using upper arms and shoulders to press against something with steady force in order to thrust forward, downward, or outward. (O <input type="checkbox"/> ) , (F <input type="checkbox"/> ) , (C <input type="checkbox"/> )   |  |

**DEGREE OF PHYSICAL ACTIVITY (CLICK in the box's for all that apply and INDICATE how often it is done)**

- A. Sedentary Work: Exerting up to 10 pounds of force occasionally and/or a negligible amount of force frequently or constantly to lift, carry, push, pull, or otherwise move objects, including the human body. Sedentary work involves sitting most of the time. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met. (O , (F , (C
- B. Light Work: Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently and/or a negligible amount of force constantly to move objects. If the use of arm and/or leg controls requires exertion of forces greater than that for Sedentary Work and the worker sits most of the time, the job is rated for Light Work. (O , (F , (C
- C. Medium Work: Exerting up to 50 pounds of force occasionally, and/or up to 20 pounds of force frequently, and/or up to 10 pounds of force constantly to move objects. (O , (F , (C
- D. Heavy Work: Exerting up to 100 pounds of force occasionally, and/or up to 50 pounds of force frequently, and/or up to 20 pounds. (O , (F , (C
- E. Very heavy work: Exerting in excess of 100 pounds of force occasionally, and/or in excess of 50 pounds of force frequently, and/or in excess of 20 pounds of force constantly to move objects. (O , (F , (C

**VISUAL DEMANDS (CLICK in the box's for all that apply and INDICATE how often it is done)**

- A. CLERICAL, ADMINISTRATIVE, MACHINE OPERATORS (including inspection), INSPECTION, CLOSE ASSEMBLY. This is a minimum standard for use with those whose work deals largely with preparing and analyzing data and figures, accounting, transcription, computer terminal, extensive reading, visual inspection involving small defects, small parts, operation of machines (including inspection), using measurement devices, assembly, or fabrication of parts at distances close to the eyes. (O , (F , (C
- B. MECHANICS, SKILLED TRADESPEOPLE MACHINE OPERATORS (without inspection): This is a minimum standard for use with those whose work deals with machines such as lathes, drill presses, power saws, and mills, where the seeing job is at or within arm's reach. (If the machine operator also inspects, use the "A" standard.) Also, mechanics and skilled tradespeople and those who do work of a nonrepetitive nature such as carpenters, technicians, service people, plumbers, painters, mechanics, etc. (O , (F , (C
- C. MOBILE EQUIPMENT OPERATORS: This is a minimum standard for use with those who operate cars, trucks, forklifts, cranes, and high lift equipment. (O , (F , (C
- D. OTHER: This is a minimum standard based on the criteria of accuracy and neatness of work for housekeepers and dining services staff. (O , (F , (C

**PHYSICAL CONDITIONS OF WORK (CLICK in the box's for all that apply and INDICATE how often it is done)**

- A. The worker is subject to inside environmental conditions: Protection from weather condition but not necessarily from temperature changes. (O , (F , (C
  - B. The worker is subject to outside environmental conditions: Activities occur inside and outside. (O , (F , (C
  - C. The worker is subject to both environmental conditions: Activities occur inside and outside. (O , (F , (C
  - D. The worker is subject to extreme cold: Temperatures below 32 degrees for periods of more than one hour. (O , (F , (C
  - E. The worker is subject to noise: There is sufficient noise to cause the worker to shout in order to be heard above the ambient noise level. (O , (F , (C
  - F. The worker is subject to vibration: Exposure to oscillating movements of the extremities or whole body. (O , (F , (C
  - G. The worker is subject to hazards: Includes a variety of physical conditions, such as proximity to moving mechanical parts, electrical current, working on scaffolding and high places, exposure to high heat, or exposure to chemicals. (O , (F , (C
  - H. The worker is subject to atmosphere conditions: One or more of the following conditions that affect the respiratory system or the skin. Fumes, odors, dusts, mists, gases, or poor ventilation. (O , (F , (C
  - I. The worker is subject to oils: There is air and/or skin exposure to oils and other cutting fluids. (O , (F , (C
  - J. The worker is required to wear a respirator. (O , (F , (C
  - K. None: The worker is not substantially exposed to adverse environmental conditions (such as in typical office or administrative work).
- NOTE:** The physical and visual demands outlined in this checklist are worded in a traditional manner to facilitate communication with supervisors and employees. The University will take into consideration non-traditional means of accomplishing work tasks when assessing potential accommodations.