



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

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

**DEPARTMENT: JUVENILE AND FAMILY COURT SERVICES**  
**PHYSICAL REQUIREMENTS: JUVENILE COURT SERVICES MANAGER**

Work is performed primarily in an office environment. Positions in this class typically require:

- Sitting or standing for extended periods of time. Walking and balancing on all types of terrain, bending, stooping, twisting, and climbing steps,
- Reaching above and/or below shoulder,
- Handling/grasping documents or equipment,
- Clear speaking and adequate hearing sufficient to communicate effectively and respond appropriately in-person and/or on the telephone,
- Hearing audible signals, traffic, & equipment,
- Vision sufficient to read source materials, computer screen data, see detail or color,
- Repetitive motions for computer use,
- Potentially hazardous conditions and/or violent or hostile individuals, and
- Requires exertion of force of 25 pounds occasionally, and/or 10 pounds continuously to lift/carry/move objects, files/documents, and other materials.

**PHYSICAL AND MENTAL DEMANDS**

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				
21-35 lbs.		x				
36-50 lbs.	x					
50 + lbs.	x					



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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. Stooing/ Bending		x				To access low filing cabinets/shelves
11. Sitting					x	
12. See/Hear/ Speak	-	-	-	-	-	
Sees Detail					x	Documents, computer screen
Color Discrim.					x	Files may be color coded
Visual Displays					x	Computer screen
Audible						



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Signals					x	
Oral Direction					x	
<b>Activity</b>	<b>Never 0%</b>	<b>Inter. 1-10%</b>	<b>Occas. 11-33%</b>	<b>Freq. 34-66%</b>	<b>Cont. 67+%</b>	<b>Further Description</b>
13. Working Cond/Exp.	-	-	-	-	-	
Uneven Ground	x					
Work Outside	x					
Work Inside					x	Office environment
High Elevations	x					
Moving Objects	x					
Slippery Surface	x					
Wetness	x					
Temp. Extremes	x					
Confined Spaces	x					
Special Clothing					x	
Vibration	x					
Use of Solvents	x					
Use of Detergent	x					
Chemical Contact	x					
Chemical Vapors	x					
Dust or Particles		x				



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**PHYSICIAN TO COMPLETE:** (Please check appropriate item)

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

\_\_\_\_\_ Worker requires restrictions to perform the job. The restrictions are described on the Activity Prescription Form (attached).

Additional Physician Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Physician Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address and Phone#

\_\_\_\_\_  
Date