



Department of Public Works  
Administration

Jerrel Kruschke, P.E.  
Commissioner of Public Works

Dan Thomas, M.P.A., J.D.  
Director of Administrative Services

December 26, 2023

City Service Commission  
Department of Employee Relations  
City Hall, Room 706

Re: Extension of Temporary Appointment Request: Anderson, Ashley – 2<sup>nd</sup> Extension Request

Dear City Service Commissioners:

The Department of Public Works (DPW) respectfully requests permission and approval to extend the temporary appointment of Ms. Ashley Anderson to DPW Payroll Services Assistant through March 6, 2024. This is the second extension request for Ms. Anderson.

Ms. Anderson's temporary appointment expires on January 6, 2024. The Department recently had a vacancy in both our Safety Section for Safety Specialist- Sr and two vacancies in the HR Section- Human Resources Representatives.

As a result of these vacancies, DPW recently filled the position of Safety Specialist-Sr.; however, the HR Representatives still remain vacant but we are working with Department of Employee Relations to complete those recruitments. In the meantime, we need Ms. Anderson to continue supporting our HR section.

Ms. Anderson has been assisting with random drug and alcohol pulls. This position is also assisting with tracking work injuries in Citytime and OSHA. She also has been responding to Unemployment Claims. Finally, she has been tracking FMLA and auditing all the Department's current FMLA Designations related to work injuries for employees absent for more than 4 or more consecutive days.

Ms. Anderson has been a great asset to this position. She has been able to utilize her previous experiences, including those gained with DPW Administration. Therefore, we are respectfully requesting to extend Ms. Anderson's appointment.

If you have any questions regarding this request, please feel welcome to contact me at 414-286-3307.

Sincerely,

DocuSigned by:

*Dan Thomas*

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Dan Thomas M.P.A., J.D.

DPW Administrative Services Director



## TEMPORARY APPOINTEE STATEMENT OF UNDERSTANDING

Rule IX, Section 2 of the Civil Service Rules allows a hiring authority to appoint a person to a position on a temporary basis. A temporary appointment may be appropriate when services are for a limited period, or during the leave of absence of an employee who plans to return to the service of the city. Therefore a temporary appointment is limited to a period of 90 days, unless an extension is authorized by the City Service Commission.

**SECTION I. TO BE COMPLETED BY HIRING AUTHORITY – PLEASE TYPE OR PRINT LEGIBLY**

|   |                  |                    |
|---|------------------|--------------------|
| <b>APPLICANT NAME (last, first, middle)</b> |                  | <b>DATE</b>        |
| ANDERSON, ASHLEY, S                         |                  | 12/27/2023         |
| <b>POSITION TITLE</b>                       | <b>PAY RANGE</b> | <b>RATE OF PAY</b> |
| DPW PAYROLL SERVICES ASSISTANT              | 50N              | \$2,399.47         |

**SECTION II. TEMPORARY APPOINTEE STATEMENT OF UNDERSTANDING**

I understand that if I am appointed to the position described above on a temporary basis, that I must meet the requirements for the position. I further understand that this temporary appointment may expire at any time and is limited to a period of 90 days, unless an extension at the request of the hiring authority is approved by the City of Milwaukee Civil Service Commission.

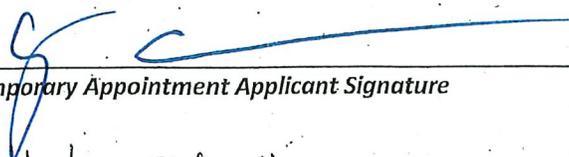
I understand that as a temporary appointee I am ineligible for paid holidays, sick leave, vacation or other benefits while serving on this temporary appointment, and that this temporary appointment shall not confer upon me any privilege of regular appointment. (Note: A current City of Milwaukee employee who accepts a temporary appointment to a different position retains his/her current benefits and civil service status).

I understand that if I wish to be considered for regular employment I must compete in a Civil Service examination for the position, and must pass the examination with a grade which shall place me among the top five scores on the eligible list in order to be eligible to interview for regular appointment to the position.

I understand that acceptance of a temporary appointment will not affect my rights to certification for permanent appointment to any position for which I am currently on an eligible list for.

In accordance with Civil Service Rule VIII, Section 10, concerning nepotism, I hereby certify that I am not related, either by blood or through marriage, to the appointing officer or to any member of the appointive board or body or to any direct superior or to any elective or appointive City official. (This includes relative of both whole and half blood, and extends to persons as closely related as first cousins when the relationship is by blood, or more closely related than first cousins when the relationship is through marriage, and includes the cases of husbands of sisters-in-law and wives of brothers-in-law).

A Rule IX, Section 2, temporary appointee who is on an eligible list may be considered for future regular appointment when the appointee ranks among the certifiable highest eligible on the list, or compete in a future examination.

  
 \_\_\_\_\_  
 Temporary Appointment Applicant Signature

12/27/2023  
 \_\_\_\_\_  
 Date Signed

Joshua Stratton  
 \_\_\_\_\_  
 Witness Name (Print)

  
 \_\_\_\_\_  
 Witness Signature



Department of Employee Relations  
200 E. Wells Street, Room 706  
Milwaukee, WI 53202-3554



## NOTICE OF TEMPORARY APPOINTMENT

Rule IX, Section 2 of the Civil Service Rules allows a department to appoint a person to a position on a temporary basis. A temporary appointment may be appropriate when services are for a limited period, or during the leave of absence of an employee who plans to return to the service of the city. Therefore a temporary appointment is limited to a period of 90 days, unless an extension is authorized by the City Service Commission.

When making an employment offer for a temporary appointment, the appointing officer must submit this completed form to DER no later than the close of the pay period in which the temporary appointment has been made. All temporary appointees must meet the minimum requirements established for the position to which the individual is appointed.

**SEND COMPLETED FORM AND SUPPORTING DOCUMENTATION TO DER, CITY HALL, ROOM 706 OR [DERCERTIFICATION@MILWAUKEE.GOV](mailto:DERCERTIFICATION@MILWAUKEE.GOV)**

| TEMPORARY APPOINTMENT / APPOINTEE DETAILS  |  |  |                               |
|--|--|--|-------------------------------|
| DEPARTMENT/DIVISION<br>Public Works / Admin Services   | LAST NAME<br>Anderson                              | FIRST NAME<br>Ashley   | INITIAL                       |
| AUTHORIZED POSITION TITLE<br>DPW Payroll Services Assistant  | PAY RANGE<br>50N                                   | F&P COMMITTEE APPROVAL DATE  | REQUISITION #                 |
| UNDERFILL TITLE (IF APPLICABLE)  | PAY RANGE  | WAS THE INDIVIDUAL HIRED FROM AN ELIGIBLE LIST?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No      If yes, Referral # |                               |
| REASON FOR TEMPORARY APPOINTMENT<br><input type="checkbox"/> During Leave of Absence of an employee who is expected to return<br><input checked="" type="checkbox"/> To perform services of a temporary nature and for a limited period  | EFFECTIVE DATE<br>01/06/2024                       | ANTICIPATED EXPIRATION DATE<br>03/06/2024  | T.A. RATE OF PAY<br>2,399.47  |
| <b>ATTACH A COPY OF THE CURRENT JOB DESCRIPTION &amp; A RESUME IN ADDITION TO COMPLETING THE INFORMATION BELOW</b>   |  |  |                               |
| PROVIDE AN EXPLANATION OF WHY THE TEMPORARY APPOINTMENT IS NEEDED:<br>This person was on a previous temporary appointment helping our HR Assistant who was out on leave. This position is/was assisting in our HR/Safety section as it relates to our Safety Specialist needs. This person is assisting with random drug and alcohol pulls. This position is also assisting with tracking work injuries in Citytime and OSHA. She also will be tracking FMLA related to work injuries. |  |  |                               |
| EXPLAIN HOW THE INDIVIDUAL WAS SELECTED FOR THE APPOINTMENT, INCLUDING THE SELECTION PROCESS USED AND IF NOT FROM AN ELIGIBLE LIST, HOW THE INDIVIDUAL WAS IDENTIFIED AS A POTENTIAL TEMPORARY APPOINTEE:<br>Ms. Anderson has a command of all our systems in DPW Apps, HRMS, and City Time. In addition, she can run various reports/queries between all systems to share reports with various departments.   |  |  |                               |
| PROVIDE INFORMATION TO DEMONSTRATE HOW THE INDIVIDUAL MEETS THE MINIMUM REQUIREMENTS:  |  |  |                               |
| <u>TRAINING AND EDUCATION:</u><br>Please see resume.   | <u>WORK EXPERIENCE:</u><br>Please see resume.      | <u>OTHER REQUIREMENTS (i.e. LICENSES):</u><br>Please see resume.   |                               |
| IS THIS INDIVIDUAL A CURRENT CITY OF MILWAUKEE EMPLOYEE?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  | IF YES, CURRENT DEPARTMENT:<br>DPW Admin Services  | CURRENT POSITION TITLE:<br>Payroll Assistant 3   | EMPLOYEE ID NUMBER:<br>028229 |
| IS THE INDIVIDUAL BEING GIVEN THIS TEMPORARY APPOINTMENT RELATED BY BLOOD OR MARRIAGE TO THE APPOINTING OFFICER, ANY MEMBER OF THE APPOINTING BOARD OR BODY, DIRECT SUPERVISOR, OR TO ANY ELECTIVE OF APPOINTIVE CITY OFFICIAL? (Refer to CSC Rule VIII, Section 10 regarding nepotism.)<br><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes - Explain Relationship   |  |  |                               |
| <b>THIS TEMPORARY APPOINTMENT IS MADE IN ACCORDANCE WITH RULE IX, SECTION 2 OF THE CITY SERVICE COMMISSION AND IS LIMITED TO A PERIOD OF 90 DAYS UNLESS AN EXTENSION IS APPROVED BY THE COMMISSION.</b>  |  |  |                               |
| REPORTING OFFICER<br>Shannon Goodwin   | SIGNATURE<br>                                      | TITLE<br>Admin. Services Manager   | DATE<br>01/02/2024            |
| APPROVING OFFICER<br>Dan Thomas  | SIGNATURE<br>DocuSigned by:<br><br>6E37AE6E79B14BB | TITLE<br>DPW Admin. Services Director  | DATE<br>01/02/2024            |
| <b>THIS SECTION FOR DER REVIEW</b>   |  |  |                               |
| DER REVIEW COMPLETED BY:   | SIGNATURE  | TITLE  | DATE                          |

# JOB DESCRIPTION

## FOR DER USE ONLY

Vacancy No. \_\_\_\_\_

City Service  
Commission: \_\_\_\_\_  
Fire & Police  
Commission: \_\_\_\_\_

Finance  
Committee: \_\_\_\_\_  
Common  
Council: \_\_\_\_\_

**Instructions:** Complete all sections. Refer to the *Guidelines for Preparing Job Descriptions* for instructions on completing specific items.

|   |  |  |   |   |  |
|---|--|--|---|---|--|
| <b>1. Date Prepared/ Revised:</b><br>10/1/2023  |  | <b>2. Present Incumbent:</b><br>Jim Schoenrock   |   | <b>Is incumbent underfilling position?</b>  |  |
| <b>3. Date Filled:</b><br>01/18/15  |  | <b>4. Previous Incumbent:</b><br>Camille Cole  |   | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/><br><i>If YES, indicate Underfill Title in box 10.</i> |  |
| <b>5. Department:</b><br>Public Works, Dept. of   |  |  | <b>Bureau:</b><br><b>Division:</b> Admin Services |   | <b>Unit:</b><br><b>Section:</b> Payroll  |
| <b>6. Work Location:</b> 841 N Broadway, Rm 507   |  |  | <b>Telephone:</b> 286-3463<br><b>Email:</b>       |   | <b>Work Schedule:</b><br>Hours: 8:00am-4:45pm / Days:<br>Mon-Fri   |
| <b>7. Represented by a Union?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  | <b>8. Bargaining Unit:</b> District Council 48<br><b>If in District Council 48, which local?</b> 428 |   |   | <b>9. FLSA Status (check one):</b><br><input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Non-Exempt |
| <b>10.</b>  | <b>Official Title:</b><br>DPW PAYROLL SERVICES ASSISTANT |  |   | <b>Pay Range</b>  | <b>Job Code</b>  |
|   |  |  |   | 50N   | 7715DC   |
|   | <b>Underfill Title (if applicable):</b>                  |  |   |   |  |
| <b>Requested Title (if applicable):</b>   |  |  |   |   | <b>EEO Code</b><br>501   |
| <b>Recommended Title (DER Use Only):</b>  |  |  |   | Approved by: _____  |  |
|   |  |  |   | Date: _____   |  |

### 11. BASIC FUNCTION OF POSITION:

This position works in conjunction with the Business Operations Manager to oversee, maintain and audit various personnel and payroll databases.

### 12. DESCRIPTION OF JOB (Check if description applies to **Official Title** or **Underfill Title** ):

#### A. ESSENTIAL FUNCTIONS/Duties and Responsibilities: (Refer to the "Guidelines for Preparing Job Descriptions" for instructions on determining Essential Functions.)

| % of Time | ESSENTIAL FUNCTION  |
|-----------|---|
| 55        | <ul style="list-style-type: none"> <li>Oversight and maintenance of DPW Absences, FMLA and Discipline databases. Audit accuracy of absences and FMLA by comparing entries with salary payments. Check for compliance of necessary supporting documentation. Write reports using structured query language. Provide training to staff members and managers on use of databases and reports.</li> </ul> |
| 25        | <ul style="list-style-type: none"> <li>Respond to employment and salary inquiries made by employers, law offices, Worker's Compensation and other government agencies. Produce probationary reports for DPW employees citing accurate probationary periods.</li> </ul>  |
| 20        | <ul style="list-style-type: none"> <li>Calculate and submit clothing allowance payments to Comptroller's Office. Maintain library of DPW job descriptions and management performance reviews. Run various quarterly and year-end personnel and payroll reports. Lead special projects.</li> </ul>   |

#### B. PERIPHERAL DUTIES:

| % of Time | PERIPHERAL DUTY   |
|-----------|---|
|           | <ul style="list-style-type: none"> <li>Leadworker in payroll office.</li> </ul>   |
|           | <ul style="list-style-type: none"> <li>Provide assistance and backup to Personnel Payroll Assistant III positions.</li> </ul> |
|           | <ul style="list-style-type: none"> <li>Serve as back-up for DOT driving abstract retrievals.</li> </ul>                       |
|           | <ul style="list-style-type: none"> <li>Serve as back-up for routine Unemployment Compensation inquiries.</li> </ul>           |

The above statements are intended to summarize the nature and level of work and typical responsibilities and duties being performed by the incumbent(s) of this job. They are not intended to be an exhaustive list of all responsibilities, duties, and tasks required of the position.

**C. NAME AND TITLE OF IMMEDIATE SUPERVISOR:**

Business Operations Manager

**D. SUPERVISION RECEIVED:** (Describe the extent to which work assignments and methods are outlined, reviewed, and approved by this position's supervisor.)

Work assignments and methods are outlined, reviewed and approved by the Business Operations Manager.

**E. SUPERVISION EXERCISED:**

Total number of employees for whom responsible, either directly or indirectly = 9.

**Direct Supervision:** List the number and titles of personnel directly supervised. Specify the kind and extent of supervision exercised by indicating one or more of the following:

|                                    |   |
|------------------------------------|---|
| a. Assign duties                   | e. Sign or approve work   |
| b. Outline methods                 | f. Make hiring recommendations  |
| c. Direct work in progress         | g. Prepare performance appraisals   |
| d. Check or inspect completed work | h. Take disciplinary action or effectively recommend such   |
| <b>Number Supervised</b>           | <b>Extent of Supervision Exercised</b><br><i>(Select those that apply from list above, a - h)</i> |
| 9                                  | Personnel Payroll Assistant III<br>b, c, d  |

**F. MINIMUM QUALIFICATIONS REQUIRED:** (Indicate the MINIMUM qualifications required to enter the job.)

- i. Education and Experience:  
College level coursework in Accounting, Human Resources or Office Management.  
Four years experience in a payroll environment.  
Considerable experience with database software including PeopleSoft HRMS, FMIS and CityTime.  
Experience with spreadsheet software
- ii. Knowledge, Skills and Abilities:  
Knowledge of mathematics and the ability to perform calculations.  
Analytical, problem-solving skills  
Ability to interpret policies, ordinances and rules.  
Ability to guide users in the use of Citytime and PeopleSoft HRMS.  
Ability to function in a "lead" capacity.
- iii. Certifications, Licenses, Registrations:
- iv. Other Requirements:  
Ability to interact with office staff, field staff and other departments.  
Ability to work with little direct supervision.  
Flexible schedule necessary to meet payroll deadlines.

**13. PHYSICAL AND ENVIRONMENTAL DEMANDS: TOOLS AND EQUIPMENT USED**

The Americans with Disabilities Act of 1993 requires job descriptions to provide detailed information regarding the physical demands required to perform the essential functions of a job; the conditions under which the job is performed; and the tools and equipment the employee will be required to use on the job. Reasonable accommodations may be made to enable qualified individuals to perform the essential duties and responsibilities of the job for each of the categories listed below.

*The above statements are intended to summarize the nature and level of work and typical responsibilities and duties being performed by the incumbent(s) of this job. They are not intended to be an exhaustive list of all responsibilities, duties, and tasks required of the position.*

**G. PHYSICAL ACTIVITY OF THE POSITION:** (List the physical activities that are representative of those that must be met to successfully perform the essential functions of the job).

**CHECK ALL THAT APPLY:**

|                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/>            | <b>Climbing:</b> Ascending or descending ladders, stairs, scaffolding, ramps, poles, and the like; using feet and legs and/or hands and arms. Body agility is emphasized. Check only if the amount and kind of climbing required exceeds that required for ordinary locomotion.           |
| <input type="checkbox"/>            | <b>Balancing:</b> Maintaining body equilibrium to prevent falling when walking, standing or crouching on narrow, slippery or erratically moving surfaces. Check only if the amount and kind of balancing exceeds that needed for ordinary locomotion and maintenance of body equilibrium. |
| <input type="checkbox"/>            | <b>Stooping:</b> Bending body downward and forward by bending spine at the waist. Check only if it occurs to a considerable degree and requires full use of the lower extremities and back muscles.   |
| <input checked="" type="checkbox"/> | <b>Kneeling:</b> Bending legs at knee to come to a rest on knee or knees.   |
| <input checked="" type="checkbox"/> | <b>Crouching:</b> Bending the body downward and forward by bending leg and spine.   |
| <input type="checkbox"/>            | <b>Crawling:</b> Moving about on hands and knees or hands and feet.   |
| <input checked="" type="checkbox"/> | <b>Reaching:</b> Extending Hand(s) and arm(s) in any direction.   |
| <input type="checkbox"/>            | <b>Standing:</b> Particularly for sustained periods of time.  |
| <input type="checkbox"/>            | <b>Walking:</b> Moving about on foot to accomplish tasks, particularly for long distances.  |
| <input type="checkbox"/>            | <b>Pushing:</b> Using upper extremities to exert force in order to draw, press against something with steady force in order to thrust forward, downward or outward.   |
| <input type="checkbox"/>            | <b>Pulling:</b> Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion.   |
| <input type="checkbox"/>            | <b>Lifting:</b> Raising objects from a lower to a higher position or moving objects horizontally from position-to-position. Check only if it occurs to a considerable degree and requires substantial use of the upper extremities and back muscles.                                      |
| <input checked="" type="checkbox"/> | <b>Fingering:</b> Picking, pinching, typing or otherwise working primarily with fingers rather than with the whole hand or arm, as in handling.   |
| <input checked="" type="checkbox"/> | <b>Grasping:</b> Applying pressure to an object with fingers and palm.  |
| <input checked="" type="checkbox"/> | <b>Feeling:</b> Perceiving attributes of objects such as size, shape, temperature or texture by touching with the skin, particularly that of the fingertips.  |
| <input checked="" type="checkbox"/> | <b>Talking:</b> Expressing or exchanging ideas by means of the spoken word. Those activities which demand detailed or important instructions spoken to other workers accurately, loudly or quickly.   |
| <input checked="" type="checkbox"/> | <b>Hearing:</b> Perceiving the nature of sounds with no less than a 40 db loss. Ability to receive oral communication and make fine discriminations in sound.   |
| <input checked="" type="checkbox"/> | <b>Repetitive Motions:</b> Substantial movements (motions) of the wrist, hands, and/or fingers.   |
| <input type="checkbox"/>            | <b>Driving:</b> Minimum standards required by State Law (including license).  |

**H. PHYSICAL REQUIREMENTS OF THE POSITION:** (List the physical requirements that are essential functions of the job.)

**CHECK ONE:**

|                                     |  |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <b>Sedentary Work:</b> Exerting up to 10 pounds of force occasionally and/or negligible amount of force frequently or constantly to lift, carry, push, pull or otherwise move objects. 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. |
| <input type="checkbox"/>            | <b>Light Work:</b> Exerting up to 10 pounds of force occasionally and/or 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.  |
| <input type="checkbox"/>            | <b>Medium Work:</b> 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.   |
| <input type="checkbox"/>            | <b>Heavy Work:</b> Exerting up to 100 pounds of force occasionally, and/or up to 50 pounds of force frequently, and/or up to 20 pounds of force constantly to move objects.  |
| <input type="checkbox"/>            | <b>Very Heavy Work:</b> 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.  |

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**I. VISUAL ACUITY REQUIREMENTS:** (List the visual acuity requirements that are essential functions of the job.)

**CHECK ONE:**

|                                     |   |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <b>Operators (Electronic Equipment), Inspection, Close Assembly, Clerical, Administrative:</b> This is a minimum standard for use with those whose job requires work done at close visual range (i.e. preparing and analyzing data and figures, accounting, transcription, computer terminal, extensive reading, visual inspection involving small parts, operation of machines, using measurement devices, assembly or fabrication of parts).            |
| <input type="checkbox"/>            | <b>Machine Operators, Mechanics, Skilled Tradespeople:</b> This is a minimum standard for use with those whose work deals with machines where the seeing job is at or within arm's reach. This also includes mechanics and skilled tradespeople and those who do work of a non-repetitive nature such as carpenters, technicians, service people, plumbers, painters, mechanics, etc. (If the machine operator also inspects, check the "Operators" box.) |
| <input type="checkbox"/>            | <b>Mobile Equipment Operators:</b> This is a minimum standard for use with those who operate cars, trucks, forklifts, cranes, and high lift equipment.  |
| <input type="checkbox"/>            | <b>Other:</b> This is a minimum standard based on the criteria of accuracy and neatness of work for janitors, sweepers, etc.  |

**J. THE CONDITIONS THE WORKER WILL BE SUBJECT TO IN THIS POSITION:**

List the environmental/working conditions to which the employee may be exposed while performing the essential functions of the job. Include scheduling considerations such as on-call for emergencies, rotating shift, etc. **Approximate Percentage of time performing field work:** \_\_\_\_\_%

**CHECK ALL THAT APPLY:**

|                                     |  |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <b>None:</b> The worker is not substantially exposed to adverse environmental conditions (such as typical office or administrative work).  |
| <input type="checkbox"/>            | <b>The worker is subject to inside environmental conditions:</b> Protection from weather conditions but not necessarily from temperature changes (i.e. warehouses, covered loading docks, garages, etc.)               |
| <input type="checkbox"/>            | <b>The worker is subject to outside environmental conditions:</b> No effective protection from weather.  |
| <input type="checkbox"/>            | <b>The worker is subject to extreme cold:</b> Temperatures below 32 degrees for period of more than one hour.  |
| <input type="checkbox"/>            | <b>The worker is subject to extreme heat:</b> Temperatures above 100 degrees for periods of more than one hour.  |
| <input type="checkbox"/>            | <b>The worker is subject to noise:</b> There is sufficient noise to cause the worker to shout in order to be heard above the surrounding noise level.  |
| <input type="checkbox"/>            | <b>The worker is subject to vibration:</b> Exposure to oscillating movements of the extremities or whole body.   |
| <input type="checkbox"/>            | <b>The worker is subject to hazards:</b> Includes a variety of physical conditions, such as proximity to moving mechanical parts, electrical current, working on scaffolding and high places or exposure to chemicals. |
| <input type="checkbox"/>            | <b>The worker is subject to atmospheric conditions:</b> One or more of the following conditions that affect the respiratory system or the skin: Fumes, odors, dust, mists, gases or poor ventilation.                  |
| <input type="checkbox"/>            | <b>The worker is subject to oil:</b> There is air and/or skin exposure to oils and other cutting fluids.   |
| <input type="checkbox"/>            | <b>The worker is required to wear a respirator.</b>  |

**K. MACHINE, TOOLS, EQUIPMENT, ELECTRONIC DEVICES, SOFTWARE, ETC. USED BY POSITION:**

List equipment needed to successfully perform the essential functions of the job. Reasonable accommodations may be made to enable qualified individuals with disabilities to perform the essential functions.)

**CHECK ALL THAT APPLY:**

|                                     |  |                                     |   |
|-------------------------------------|--|-------------------------------------|---|
| <input type="checkbox"/>            | Camera and photographic equipment                | <input checked="" type="checkbox"/> | Office Equipment (desk, chair, telephone, etc.) |
| <input type="checkbox"/>            | Cleaning supplies                                | <input checked="" type="checkbox"/> | Office supplies (pens, staplers, pencils, etc.) |
| <input type="checkbox"/>            | Commercial vehicle                               | <input checked="" type="checkbox"/> | Packing materials (boxes, shrink wrap, etc.)    |
| <input checked="" type="checkbox"/> | Data processing equipment                        | <input checked="" type="checkbox"/> | PC equipment (monitor, keyboard, printer, etc.) |
| <input checked="" type="checkbox"/> | Handcart   | <input checked="" type="checkbox"/> | PC software                                     |
| <input type="checkbox"/>            | Hand tools ( <i>please list</i> ):               |                                     |   |
| <input checked="" type="checkbox"/> | Office Machines ( <i>check all that apply</i> ): | <input checked="" type="checkbox"/> | Copier  |
|                                     |  | <input checked="" type="checkbox"/> | Facsimile                                       |
|                                     |  | <input checked="" type="checkbox"/> | Calculator                                      |
|                                     |  | <input type="checkbox"/>            | Cash register                                   |
| <input type="checkbox"/>            | Other ( <i>please list</i> ):                    |                                     |   |

The above statements are intended to summarize the nature and level of work and typical responsibilities and duties being performed by the incumbent(s) of this job. They are not intended to be an exhaustive list of all responsibilities, duties, and tasks required of the position.

L. **SUPPLEMENTARY INFORMATION:** (Indicate any other information which further explains the importance, difficulty, or uniqueness of the position, such as its scope of responsibility related to finances, equipment, people, information, etc. Also indicate success factors such a personal characteristics that contribute to an individual's ability to perform well in the job, and any other special considerations.)

M. I believe that the statements made above in describing this job are complete and accurate.



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*Signature of Department Head or Designated Representative*

*The above statements are intended to summarize the nature and level of work and typical responsibilities and duties being performed by the incumbent(s) of this job. They are not intended to be an exhaustive list of all responsibilities, duties, and tasks required of the position.*