



April 26, 2023

**Milwaukee Police Department**  
Police Administration Building  
749 West State Street  
Milwaukee, Wisconsin 53233  
<http://www.milwaukee.gov/police>

**Jeffrey B. Norman**  
Chief of Police

(414) 933-4444

The Board of  
Fire and Police Commissioners  
200 East Wells Street, Room 706  
Milwaukee, WI 53202

RE: REQUEST FOR CARPENTER RECRUITMENT/ELIGIBILITY LIST

Dear Commissioners:

I respectfully request that your Honorable Commission refer this request to the Department of Employee Relations (DER) to conduct recruitment, administer an examination, and provide an eligibility list for the position of Carpenter as soon as administratively possible. The Carpenter position is a civilian position assigned to the Facilities Services Division. Under the general supervision of the Police Department's Building Maintenance Supervisor II, this position is responsible for building, installing, maintaining, and repairing building components related to the carpentry trade; including, but not limited to, exterior and interior components, cabinetry, finish work, furniture, flooring, walls, and prefabricated interior systems.

Attached please find a job description for the position. Department representatives are available to assist DER staff in this matter. If you have questions regarding this matter, please contact Human Resources Representative Shrea D. Whitten at (414) 935-7683.

Sincerely,

A handwritten signature in black ink, appearing to read 'JBN', with a long horizontal flourish extending to the right.

JEFFREY B. NORMAN  
CHIEF OF POLICE

JBN:sw  
Attachment

# JOB DESCRIPTION

| FOR DER USE ONLY             |                       |
|------------------------------|-----------------------|
| <b>Vacancy No.</b>           |                       |
| City Service<br>Commission:  | Finance<br>Committee: |
| Fire & Police<br>Commission: | Common<br>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>12/12/2022                                                       |  | <b>2. Present Incumbent:</b><br>New Position                                           |                     | <b>Is incumbent underfilling position?</b>                                                                           |  |
| <b>3. Date Filled:</b>                                                                                |  | <b>4. Previous Incumbent:</b>                                                          |                     | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>                                                  |  |
|                                                                                                       |  |                                                                                        |                     | If YES, indicate Underfill Title in box 10.                                                                          |  |
| <b>5. Department:</b> Milwaukee Police Depart.                                                        |  | <b>Bureau:</b> Administration<br><b>Division:</b> Facilities Services                  |                     | <b>Unit:</b><br><b>Section:</b>                                                                                      |  |
| <b>6. Work Location:</b> 749 W. State St.                                                             |  | <b>Telephone:</b><br><b>Email:</b>                                                     |                     | <b>Work Schedule:</b><br>Hours: 8 / Days: 5                                                                          |  |
| <b>7. Represented by a Union?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  | <b>8. Bargaining Unit:</b> Non-Mgmt/Non-Rep<br>If in District Council 48, which local? |                     | <b>9. FLSA Status (check one):</b><br><input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Non-Exempt |  |
| <b>10. Official Title:</b><br>Carpenter                                                               |  | <b>Pay Range:</b><br>7KN                                                               |                     | <b>Job Code:</b>                                                                                                     |  |
| <b>Underfill Title (if applicable):</b>                                                               |  |                                                                                        |                     | <b>EEO Code:</b>                                                                                                     |  |
| <b>Requested Title (if applicable):</b>                                                               |  |                                                                                        |                     |                                                                                                                      |  |
| <b>Recommended Title (DER Use Only):</b>                                                              |  |                                                                                        | <b>Approved by:</b> |                                                                                                                      |  |
|                                                                                                       |  |                                                                                        | <b>Date:</b>        |                                                                                                                      |  |

**11. BASIC FUNCTION OF POSITION:**

The Carpenter is responsible for building, installing, maintaining, and repairing building components related to the carpentry trade; including, but not limited to, exterior and interior components, cabinetry, finish work, furniture, flooring, walls, and prefabricated interior systems.

**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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 100%      | <ul style="list-style-type: none"> <li>Regular and consistent attendance.</li> <li>Performs related finish work for laminate surfaces, millwork, and cabinetry.</li> <li>Builds, installs, maintains, and/or repairs with doors, windows, frames and related trim, casework, and hardware.</li> <li>Builds, installs, maintains, and/or repairs with all types of floors ceilings.</li> <li>Works with all types of exterior facades, including siding, trim, and sheet metal.</li> <li>Builds, installs, maintains, and/or repairs structure framing and non-load bearing partitions.</li> <li>Patch, repair, and refinish walls including light painting.</li> <li>Periodically inspect police facilities and recommend repairs.</li> <li></li> <li></li> </ul> |

**B. PERIPHERAL DUTIES:**

| % of Time | PERIPHERAL DUTY                                                                                                                        |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------|
|           | <ul style="list-style-type: none"> <li>Performs other duties as assigned.</li> <li></li> <li></li> <li></li> <li></li> <li></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.



- iii. Certifications, Licenses, Registrations:  
Valid driver's license at the time of appointment and throughout employment.
- iv. Other Requirements:  
Responsible for supplying own basic carpentry tools.

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

The Americans with Disabilities Act (ADA) of 1990, as amended by the Americans with Disabilities Act Amendments Act (ADAAA) of 2008 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.

**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 checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" type="checkbox"/> | <b>Standing:</b> Particularly for sustained periods of time.                                                                                                                                                                                                                              |
| <input checked="" type="checkbox"/> | <b>Walking:</b> Moving about on foot to accomplish tasks, particularly for long distances.                                                                                                                                                                                                |
| <input checked="" 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 checked="" 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 checked="" 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 checked="" 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 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. |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

*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.*

|                                     |                                                                                                                                                                                                                                                                                                               |
|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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 checked="" 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.                                                                                                         |

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

**CHECK ONE:**

|                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input 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 checked="" 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: 0%**

**CHECK ALL THAT APPLY:**

|                                     |                                                                                                                                                                                                                        |
|-------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/>            | <b>None:</b> The worker is not substantially exposed to adverse environmental conditions (such as typical office or administrative work).                                                                              |
| <input checked="" 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 checked="" type="checkbox"/> | <b>The worker is subject to outside environmental conditions:</b> No effective protection from weather.                                                                                                                |
| <input checked="" type="checkbox"/> | <b>The worker is subject to extreme cold:</b> Temperatures below 32 degrees for period of more than one hour.                                                                                                          |
| <input checked="" type="checkbox"/> | <b>The worker is subject to extreme heat:</b> Temperatures above 100 degrees for periods of more than one hour.                                                                                                        |
| <input checked="" 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 checked="" type="checkbox"/> | <b>The worker is subject to vibration:</b> Exposure to oscillating movements of the extremities or whole body.                                                                                                         |
| <input checked="" 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 checked="" 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 checked="" 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 checked="" type="checkbox"/> | Camera and photographic equipment                                   | <input checked="" type="checkbox"/> | Office Equipment (desk, chair, telephone, etc.) |
| <input checked="" type="checkbox"/> | Cleaning supplies                                                   | <input checked="" type="checkbox"/> | Office supplies (pens, staplers, pencils, etc.) |
| <input checked="" 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 checked="" type="checkbox"/> | Hand tools ( <b>please list</b> ): tools related to carpentry trade |                                     |                                                 |

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|                                                                                      |                                            |                                               |                                                |                                        |
|--------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------|------------------------------------------------|----------------------------------------|
| <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> ):                               |                                            |                                               |                                                |                                        |

**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.*