

Job Analysis

I am a CRP

CRP Name:

Completed By:

General Information

Company Name & EIN:

Location:

Title of Job:

SOC Code:

Contact Info:

Job Candidate Name (if applicable):

Safety Assessment

Question	YES	NO	Comments	Accommodation / Modification/ Solution
Can all staff enter and exit the building safely?	<input type="checkbox"/>	<input type="checkbox"/>		
Can staff evacuate the building from their workspace safely?	<input type="checkbox"/>	<input type="checkbox"/>		
For multi-story buildings, is there an accessible means of egress if the elevator was not operable?	<input type="checkbox"/>	<input type="checkbox"/>		
Are there visual AND audible alarms?	<input type="checkbox"/>	<input type="checkbox"/>		
Are all floor surfaces stable and slip resistant?	<input type="checkbox"/>	<input type="checkbox"/>		
Are rugs or carpets secured to the floor?	<input type="checkbox"/>	<input type="checkbox"/>		
Are emergency devices (fire extinguishers) accessible by all staff?	<input type="checkbox"/>	<input type="checkbox"/>		

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Are there changes in level (drop off) on the edge of an accessible route?	<input type="checkbox"/>	<input type="checkbox"/>		
Is equipment related to information available in alternate formatting? Consider orientation, training materials, telecommunications and any forms needed to complete the essential functions of the job.	<input type="checkbox"/>	<input type="checkbox"/>		
If applicable, is the work environment supportive and conducive of a service animal?	<input type="checkbox"/>	<input type="checkbox"/>		
Are there protruding objects?	<input type="checkbox"/>	<input type="checkbox"/>		
Is the restroom accessible?	<input type="checkbox"/>	<input type="checkbox"/>		
Is the breakroom accessible?	<input type="checkbox"/>	<input type="checkbox"/>		
Is there accessible parking (if needed) available with a clear route to the building?	<input type="checkbox"/>	<input type="checkbox"/>		
Are there any trip hazards in rooms or corridors?	<input type="checkbox"/>	<input type="checkbox"/>		

Job Analysis

Essential Functions of the Job

JOB SUMMARY:

Please list the duties or responsibilities that are essential functions of this position. Essential job functions are defined as those fixed parts of defined job that cannot be reassigned easily to other workers:

OCCUPATIONAL COMPETENCIES:

Describe the occupation in terms of knowledge, skills, and abilities required and how the work is performed in terms of tasks, work activities, and other descriptors:

Job Analysis

Job Duties and Tasks

Physical Demands:

For Lifting	Often	Sometimes	Rarely	Never
Very Heavy Over 100 lbs.				
Heavy Up to 100 lbs.				
Medium Up to 50 lbs.				
Light Up to 20 lbs.				
No Lifting Under 10 lbs.				

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Mark by the frequency that each occurs. Check the appropriate box below.

NA= Not applicable.....0% of the time

R= Rarely.....<5% of the time

O= Occasionally.....5-25% of the time

F= Frequently.....25-75% of the time

C= Constantly.....75% or more of the time

	N/A	R	O	F	C	Description
Balancing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Carrying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Climbing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Crawling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Crouching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Driving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hearing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Kneeling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Overhead Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pulling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pushing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reaching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sitting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Standing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Stooping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Talking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Twisting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Vision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Walking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Cognitive Demands:

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Competency required	Minimum level accepted for job	Potential accommodations	Comments
Reading			
Reading Comprehension			
Math			
Computer and Technology			
Other			

Educational Requirements of the Job

Age Requirement:

14 Years Old	15 Years Old	16 Years Old	18 Years Old	21 Years Old
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Education:

None	High School	Specialized Training	Vocational/ Technical	Associates Degree	Bachelor's Degree	Master's Degree	Doctoral Degree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Additional Requirements:

Residency	Health Screenings	Criminal Background Check	Driver's License	CDL License	Drug Testing	Physical Assessment

Review/ Signatures

I have reviewed and agree with the analysis of the job.

Business Representative Signature

Date

Job Analysis Completed By (Staff Name and Agency)

Date