

VOLUNTEER POSITION

DESCRIPTION FORM

(To be completed by Department)

ecessary)	shelve bool	ks and mate			cribe all position				
. Check the	e frequency	of activity	required of t	he volunteer t	o perform the	nosition			
Check the frequency of activity required of the volunteer to					Lifting/Carrying				
ACTIVITY	NEVER	OCCASIONALLY	FREQUENTLY	CONSTANTLY	ACTIVITY	NEVER	OCCASIONALLY	FREQUENTLY	CONSTANTLY
Per Day	0 HOURS	0-3 HOURS	3-6 HOURS	6-8+ HOURS	Per Day	0 HOURS	0-3 HOURS	3-6 HOURS	6-8+ HOUR
Sitting			х		1-I0 lbs			х	
Walking			Х		11-20 (bs		х		
Standing			X		21-50lbs		х		
Bending			х		51-75lbs				
Squatting			X		76-100 lbs				
Climbing					100 > Ibs	х			
Kneeling			х						
Crawling		Х							
Twisting		X							
Pushing &Pulling			X						
Reaching			Х						