

SECTION C -- ENVIRONMENTAL FACTORS

Some positions may involve unusual work conditions or working outside. Answer each *circled* item "YES" or "NO" by placing an "X" in the proper box. If you answer "NO" to any circled item give additional details in Section D.

Can you work under the following conditions:

	YES	NO		YES	NO
1. Outside (frequently) _ _ _ _ _			10. Some exposure to fumes, smoke, or gases _ _ _ _ _		
2. Severe heat _ _ _ _ _			11. Some contact with solvents, greases, and oils _ _ _ _ _		
3. Severe cold _ _ _ _ _			12. Occasional walking over rough terrain _ _ _ _ _		
4. Severe humidity _ _ _ _ _			13. Some climbing of short ladders (For example, to reach upper supply shelves) _ _ _ _ _		
5. Severe dampness or chilling _ _ _ _ _			14. Working below ground surface _ _ _ _ _		
6. Dry atmospheric conditions _ _ _ _ _			15. Working alone _ _ _ _ _		
7. Severe noise _ _ _ _ _			16. Occasional travel _ _ _ _ _		
8. Constant noise _ _ _ _ _			17. Frequent travel _ _ _ _ _		
9. Dusty atmospheres _ _ _ _ _					

SECTION D -- ADDITIONAL DETAILS

This space is for detailed answers to Sections A, B, and C. (Give item No. & Section letter)

Item No.	
Item No.	
Item No.	
Item No.	
Item No.	
Item No.	
Item No.	
Item No.	

IF YOU NEED MORE SPACE, ATTACH ADDITIONAL SHEETS

SECTION E -- CERTIFICATION BY APPLICANT

I CERTIFY that all the information I have furnished is correct to the best of my knowledge and belief.

Applicant's Signature

Date Signed (Month, Day, Year)

SECTION F -- FOR AGENCY USE ONLY

1. Position To Which Applicant Assigned	2. Other Action Taken	3. Date (Month, Day, Year)
4. Signature of Appointing Officer	5. Official Title	
6. Department or Agency	7. Address of Agency	