## Appendix O Work Capacity Test Record

Units will document the administration of the WCT to all employees and job applicants. This documentation must be retained until the next WCT is administered. Units may also be requested to provide data from these records to assist in the evaluation of the WCT process.

Privacy Act – No employee may disclose records subject to the Privacy Act unless the disclosure is permitted under 43 CFR 2.56 or to the individual to whom the record pertains. The Privacy Act contains a criminal penalty for unauthorized disclosure of records. (5 U.S.C. 552a)

To be completed by	employee:		
Name (Last, First):_	Where employed:		
Date test taken:Test administered by: (Print Name)			
ICS position for which test is required (highest needed)			
Performance level needed (select one):			
□Arduous	$\Box$ M	oderate	□ Light
Type of test taken (select one):			
□ Pack Te	st $\Box$ F	ield Test	☐ Walk Test
Work Capacity Test Descriptions:			
	Pack Test	Field Test	Walk Test
Pack weight	45 lbs.	25 lbs.	None
Distance	3 miles	2 miles	1 mile
Time	45 minutes	30 minutes	16 minutes
To be completed by test administrator:			
Test result time:			
Employee passed test (select one):		□ Yes □	No
I certify that the work capacity test was administered according to agency guidelines.			
(Signature of TestAdministrator)		(Title)	(Date)
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