

FIT FOR DUTY REPORT

STRAVIK Construction Group · Controlled Document

Document No.	Revision	Effective Date	Document Owner	Status
STV-HRM-FRM-003	00 (Initial Issue)	2026-10-24	[HR MANAGER]	Issued for review / pending approval

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REVISION HISTORY

Rev.	Date	Description of Change	Prepared By	Approved By
00	2026-10-24	Initial issue for STRAVIK Construction Group	[PREPARED BY]	Michael Gaya, President

1. EMPLOYEE INFORMATION

Employee ID: _____ Name: _____

Role/Trade: _____ Project: _____

Supervisor: _____ Evaluation Date: ____/____/____

2. REASON FOR EVALUATION

Pre-Placement Periodic (Annual) Return-to-Work Post-Incident

Describe trigger (if applicable): _____

3. ESSENTIAL JOB DEMANDS (CHECK APPLICABLE)

[DISCIPLINES] Shell Tasks:

Rebar tying Formwork Scaffold work Elevated work (>6 ft)

Lifting 50–75 lb intermittently Repetitive kneeling/crouching

Vibrating tools (saws, compactors) Prolonged heat exposure

Respirator use (N95/Half/Full/PAPR) Driving/Heavy Equipment

Other: _____

4. MEDICAL ASSESSMENT (TO BE COMPLETED BY PROVIDER)

Vitals/Observations (optional): _____

Relevant findings: _____

Audiometry/Vision (if applicable): _____

Respirator Medical Clearance questionnaire reviewed: Yes No

Drug/Alcohol test (if applicable): Neg Pos (attach lab result)

5. DECISION

FIT

FIT WITH RESTRICTIONS: _____

Duration: _____ days Re-eval Date: ____/____/____

NOT FIT

Provider Name/License: _____ Signature: _____ Date: ____/____/____

6. WORK RESTRICTIONS & ACCOMMODATIONS (IF ANY)

Restriction details (e.g., no ladder work, lift ≤ 25 lb, seated duty): _____

Proposed accommodations (reassignments, tools, team lift): _____

7. COMMUNICATION & PRIVACY

This form contains confidential medical information intended solely for HR and the HSE Medical Program Owner.

Maintain storage in a secure location. Provide supervisor with decision and restrictions only; do not disclose diagnosis.

APPROVAL

Role	Name	Title	Signature	Date
Prepared By	[PREPARED BY]	[TITLE]		
Reviewed By	[QUALITY / HSE MANAGER]	[TITLE]		
Approved By	Michael Gaya	President		

This document is reviewed at least annually, or upon significant organizational, legal or operational change, and re-issued under document control per STV-GOV-POL-011.