

Performance Profile Sheet



Craft: Cabinetmaking, 3rd Ed.

Module: 27501

Module Title: Cabinetmaking

TRAINEE NAME: _____

TRAINING PROGRAM SPONSOR: _____

INSTRUCTOR: _____

Rating Levels:

(P) Passed: performed task

(F) Failed: did not perform task

Be sure to list the date the testing for each task was completed.

Recognition:

When testing for the NCCER Training Program, record performance testing results and submit completion dates through NCCER's online Testing System.

OBJECTIVE	TASK	RATING	DATE	START TIME	END TIME
2, 3	Use power tools to make joints commonly used by cabinetmakers.				
2, 3, 4	Build a cabinet from a set of drawings.				
5	Install plastic laminate on a countertop core.				

Please make sure that both the Candidate/Trainee and Performance Evaluator sign and date this form on the signature lines to follow.

Signatures:

I understand and acknowledge that, by my signature below, I am confirming that I personally performed all tasks listed on this Performance Profile in the presence of the above-named Performance Evaluator. I understand that any and/or all of my NCCER credentials/certifications may be subject to revocation if it is subsequently determined that this Performance Profile was not delivered in accordance with NCCER Guidelines.

Candidate/Trainee: _____ Date: _____

I understand and acknowledge that, by my signature below, I am confirming that I personally observed the above-named trainee successfully complete all the tasks listed on this Performance Profile in accordance with applicable policies and procedures set forth in the current edition of the NCCER Accreditation Guidelines and Program Compliance (“NCCER Guidelines”). I understand that any and/or all of my NCCER credentials/certifications may be subject to revocation if it is subsequently determined that this Performance Profile was not delivered in accordance with NCCER Guidelines.

Performance Evaluator: _____ Date: _____

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