Module Number: 02101 has no Performance Profile Sheet; performance testing is not required for this module.
Performance Profile Sheet

Craft: Plumbing Level One
Module: 02102
Module Title: Plumbing Safety

TRAINEE NAME: __________________________________________________
TRAINING PROGRAM SPONSOR: ____________________________________
INSTRUCTOR: ____________________________________________________

Rating Levels:
(1) Passed: performed task
(2) 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 them to your Training Program Sponsor through the Registry System.

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<thead>
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<th>DATE</th>
<th>START TIME</th>
<th>END TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Inspect the following personal protective equipment:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Gloves</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Body harness</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Hard hat</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Safety glasses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Safety shoes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OBJECTIVE</td>
<td>TASK</td>
<td>RATING</td>
<td>DATE</td>
<td>START TIME</td>
<td>END TIME</td>
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<tr>
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<td>--------</td>
<td>------</td>
<td>------------</td>
<td>----------</td>
</tr>
<tr>
<td></td>
<td>• Hearing protection</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Put on the following personal protective equipment:</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Hard hat</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Body harness</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Eye protection</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Gloves</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Hearing protection</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Safety shoes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Demonstrate proper use of ladders.</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Inspect power tools (corded and cordless) to ensure they are safe to use.</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Inspect hand tools to ensure they are safe to use.</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Demonstrate/simulate the proper methods of lockout/tagout for energy sources.</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Candidate/Trainee: ____________________________ Date: ____________________

Performance Evaluator: _________________________ Date: ____________________

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Performance Profile Sheet

Craft: Plumbing Level One
Module: 02103
Module Title: Tools of the Plumbing Trade

TRAINEE NAME: __________________________________________________
TRAINING PROGRAM SPONSOR: ____________________________________
INSTRUCTOR: ____________________________________________________

Rating Levels:
(1) Passed: performed task
(2) Failed: did not perform task

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

Recognition:
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Identify plumbing tools.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Properly use plumbing tools.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Demonstrate proper maintenance and storage of hand and power tools.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Identify plumbing tools.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Properly use plumbing tools.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Demonstrate proper maintenance and storage of hand and power tools.</td>
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Candidate/Trainee: ___________________________ Date: ________________
Performance Profile Sheet

Craft: Plumbing Level One
Module: 02104
Module Title: Introduction to Plumbing Math

TRAINEE NAME: __________________________________________________
TRAINING PROGRAM SPONSOR: ____________________________________
INSTRUCTOR: ____________________________________________________

Rating Levels:
(1) Passed: performed task
(2) Failed: did not perform task
Be sure to list the date the testing for each task was completed.

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</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Measure pipe using the following methods:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• End-to-end</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• End-to-center</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Center-to-center</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• End-to-face</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Face-to-face</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
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Candidate/Trainee: ______________________________ Date: ______________________________

Performance Evaluator: __________________________ Date: __________________________

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Performance Profile Sheet

Craft: Plumbing Level One
Module: 02105
Module Title: Introduction to Plumbing Drawings

TRAINEE NAME: __________________________________________________
TRAINING PROGRAM SPONSOR: ____________________________________
INSTRUCTOR: ____________________________________________________

Rating Levels:
(1) Passed: performed task
(2) Failed: did not perform task
Be sure to list the date the testing for each task was completed.

Recognition:
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</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Sketch orthographic and isometric drawings.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Performance Evaluator: _________________________ Date: __________________

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Performance Profile Sheet

Craft: Plumbing Level One
Module: 02106
Module Title: Plastic Pipe and Fittings

TRAINEE NAME: __________________________________________________
TRAINING PROGRAM SPONSOR: ____________________________________
INSTRUCTOR: ____________________________________________________

Rating Levels:
(1) Passed: performed task
(2) Failed: did not perform task
Be sure to list the date the testing for each task was completed.

Recognition:
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<th>END TIME</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Select correct types of materials for plastic piping systems.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Identify types of fittings and valves and their uses.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Select the appropriate personal protective equipment for working with plastic piping.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Properly measure, cut, and join plastic piping.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Select the correct support and spacing for the application.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Candidate/Trainee: _______________________________ Date: _____________________
Performance Profile Sheet

Craft: Plumbing Level One
Module: 02107
Module Title: Copper Tube and Fittings

TRAINEE NAME: __________________________________________________
TRAINING PROGRAM SPONSOR: ____________________________________
INSTRUCTOR: ____________________________________________________

Rating Levels:
(1) Passed: performed task
(2) Failed: did not perform task
Be sure to list the date the testing for each task was completed.

Recognition:
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<th>END TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Select correct types of materials for copper tube systems.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Identify types of fittings and valves and their uses.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Select the appropriate personal protective equipment for working with copper tube.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Correctly measure, cut, and join copper tube.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Select the correct support and spacing for the application.</td>
<td></td>
<td></td>
<td></td>
<td></td>
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Candidate/Trainee: ___________________________ Date: ______________________
Performance Profile Sheet

Craft: Plumbing Level One
Module: 02108
Module Title: Cast-Iron Pipe and Fittings

TRAINEE NAME: __________________________________________________
TRAINING PROGRAM SPONSOR: ____________________________________
INSTRUCTOR: ____________________________________________________

Rating Levels:
(1) Passed: performed task
(2) Failed: did not perform task
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<th>END TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Select correct materials for cast-iron piping systems.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Identify types of fittings and their uses.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Select the appropriate personal protective equipment for cast-iron piping.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Correctly measure, cut, and join cast-iron pipe.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Select the correct support and spacing for the application.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
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Candidate/Trainee: ____________________________ Date: ______________________
Performance Profile Sheet

Craft: Plumbing Level One
Module: 02109
Module Title: Steel Pipe and Fittings

TRAINEE NAME: __________________________________________________
TRAINING PROGRAM SPONSOR: ____________________________________
INSTRUCTOR: ____________________________________________________

Rating Levels:
(1) Passed: performed task
(2) Failed: did not perform task
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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Identify the common types of materials, schedules, sizes, and labels used for steel piping.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Identify the common fittings and valves used with steel piping.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Properly measure, cut, and join steel piping.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Identify the hazards and safety precautions when working with steel piping.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Identify the various techniques used in hanging and supporting steel piping.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
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Candidate/Trainee: ________________________________ Date: ______________________
Performance Profile Sheet

Craft: Plumbing Level One
Module: 02110
Module Title: Introduction to Plumbing Fixtures

TRAINEE NAME: __________________________________________________
TRAINING PROGRAM SPONSOR: ____________________________________
INSTRUCTOR: ____________________________________________________

Rating Levels:
(1) Passed: performed task
(2) Failed: did not perform task

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</thead>
<tbody>
<tr>
<td>1</td>
<td>Identify the most commonly installed fixtures and appliances.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Identify the most commonly installed fixtures and appliances.</td>
<td></td>
<td></td>
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Performance Profile Sheet

Craft: Plumbing Level One
Module: 02111
Module Title: Introduction to Drain, Waste, and Vent (DWV) Systems

TRAINEE NAME: __________________________________________________
TRAINING PROGRAM SPONSOR: ____________________________________
INSTRUCTOR: ____________________________________________________

Rating Levels:
(1) Passed: performed task
(2) Failed: did not perform task
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</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Sketch an isometric drawing of a simple DWV system and label its components.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
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Performance Evaluator: __________________________ Date: _______________________

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Performance Profile Sheet

Craft: Plumbing Level One
Module: 02112
Module Title: Introduction to Water Distribution Systems

TRAINEE NAME: ____________________________________________________
TRAINING PROGRAM SPONSOR: ____________________________________
INSTRUCTOR: ____________________________________________________

Rating Levels:
(1) Passed: performed task
(2) Failed: did not perform task
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</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Sketch an isometric drawing of a simple water distribution system and label its components.</td>
<td></td>
<td></td>
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Candidate/Trainee: _______________________________ Date: _______________________
Performance Evaluator: ___________________________ Date: _______________________

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