

NOTE ON PERFORMANCE TESTING

Performance Profile Sheet(s) are included in a format that can be easily photocopied for each trainee. Performance tests are designed to measure competency in the tasks taught in each module.

Please note the number of tasks to be tested while teaching each module. Each trainee should be tested on all the tasks listed on the Performance Profile Sheet(s). Before performance testing, the instructor should brief the trainees on:

- Test objectives and criteria
- Safety precautions
- Procedures for each task to be tested

The instructor administering the performance testing should also do the following:

- Ensure that all of the needed equipment is available and operating properly.
- Set up the testing stations.
- Organize and administer the test in a way that allows for optimal performance.
- Complete the Performance Profile Sheet(s) for each trainee by assigning a pass/fail score for each listed task. Also, include the testing date for each task in the rating box.
- Monitor adherence to all safety regulations and precautions.
- Provide adequate supervision to prevent injuries.
- Take immediate and effective action to remedy any emergency.

Performance Testing

If Performance Testing is done as part of the National Center for Construction Education and Research Standardized Craft Training Program, the following conditions must be met:

1. The Craft Instructor must hold valid NCCER instructor certification for the craft being tested.
2. The training must be delivered through a Accredited Training Sponsor recognized by NCCER.
3. For every module, the specific performance testing must be completed to the satisfaction of the instructor.
4. The results of the testing must be recorded on the Training Report Form 200. This form must be provided to the local Accredited Training Sponsor to be forwarded to the NCCER National Registry.

Performance Profile Sheet

Module 44101 has no Performance Profile Sheet;
performance testing is not required for this module.

Performance Profile Sheet



Craft: Project Management

Module: 44102

Module Title: 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 completion dates through NCCER's online Testing System.

OBJECTIVE	TASK	RATING	DATE	START TIME	END TIME
1	Develop an outline for a job site safety program.				

Please make sure that both the Candidate/Trainee and Performance Evaluator sign and date this form in the space provided.

Signatures:

I, the undersigned, acknowledge the successful completion of the above performance task(s) under the supervision of an NCCER certified Performance Evaluator.

Candidate/Trainee: _____ Date: _____

Performance Evaluator: _____ Date: _____

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Performance Profile Sheet



Craft: Project Management

Module: 44103

Module Title: Interpersonal Skills

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 completion dates through NCCER's online Testing System.

OBJECTIVE	TASK	RATING	DATE	START TIME	END TIME
2	Correctly apply behavioral interviewing techniques.				
2	Create a professional development plan for a subordinate.				

Please make sure that both the Candidate/Trainee and Performance Evaluator sign and date this form in the space provided.

Signatures:

I, the undersigned, acknowledge the successful completion of the above performance task(s) under the supervision of an NCCER certified Performance Evaluator.

Candidate/Trainee: _____ Date: _____

Performance Evaluator: _____ Date: _____

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Performance Profile Sheet



Craft: Project Management

Module: 44104

Module Title: Issues and Resolutions

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 completion dates through NCCER's online Testing System.

OBJECTIVE	TASK	RATING	DATE	START TIME	END TIME
1	Demonstrate the use of problem-solving techniques.				

Please make sure that both the Candidate/Trainee and Performance Evaluator sign and date this form in the space provided.

Signatures:

I, the undersigned, acknowledge the successful completion of the above performance task(s) under the supervision of an NCCER certified Performance Evaluator.

Candidate/Trainee: _____ Date: _____

Performance Evaluator: _____ Date: _____

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Performance Profile Sheet



Craft: Project Management

Module: 44105

Module Title: Construction Documents

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 completion dates through NCCER's online Testing System.

OBJECTIVE	TASK	RATING	DATE	START TIME	END TIME
2	List the documents required to close out a project.				

Please make sure that both the Candidate/Trainee and Performance Evaluator sign and date this form in the space provided.

Signatures:

I, the undersigned, acknowledge the successful completion of the above performance task(s) under the supervision of an NCCER certified Performance Evaluator.

Candidate/Trainee: _____ Date: _____

Performance Evaluator: _____ Date: _____

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Performance Profile Sheet



Craft: Project Management

Module: 44106

Module Title: Construction Planning

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 completion dates through NCCER's online Testing System.

OBJECTIVE	TASK	RATING	DATE	START TIME	END TIME
2	Develop a plan for acquiring and managing the materials needed for a project.				

Please make sure that both the Candidate/Trainee and Performance Evaluator sign and date this form in the space provided.

Signatures:

I, the undersigned, acknowledge the successful completion of the above performance task(s) under the supervision of an NCCER certified Performance Evaluator.

Candidate/Trainee: _____ Date: _____

Performance Evaluator: _____ Date: _____

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Performance Profile Sheet



Craft: Project Management

Module: 44107

Module Title: Estimating and Cost Control

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 completion dates through NCCER's online Testing System.

OBJECTIVE	TASK	RATING	DATE	START TIME	END TIME
2	Perform a cost analysis for a simple project.				

Please make sure that both the Candidate/Trainee and Performance Evaluator sign and date this form in the space provided.

Signatures:

I, the undersigned, acknowledge the successful completion of the above performance task(s) under the supervision of an NCCER certified Performance Evaluator.

Candidate/Trainee: _____ Date: _____

Performance Evaluator: _____ Date: _____

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Performance Profile Sheet



Craft: Project Management

Module: 44108

Module Title: Scheduling

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 completion dates through NCCER's online Testing System.

OBJECTIVE	TASK	RATING	DATE	START TIME	END TIME
2	Develop a project schedule using the method specified by the instructor.				

Please make sure that both the Candidate/Trainee and Performance Evaluator sign and date this form in the space provided.

Signatures:

I, the undersigned, acknowledge the successful completion of the above performance task(s) under the supervision of an NCCER certified Performance Evaluator.

Candidate/Trainee: _____ Date: _____

Performance Evaluator: _____ Date: _____

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Performance Profile Sheet

Module 44109 has no Performance Profile Sheet;
performance testing is not required for this module.

Performance Profile Sheet



Craft: Project Management

Module: 44110

Module Title: Quality Control and Assurance

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 completion dates through NCCER's online Testing System.

OBJECTIVE	TASK	RATING	DATE	START TIME	END TIME
2	Develop a quality control checklist for a project defined by the instructor.				

Please make sure that both the Candidate/Trainee and Performance Evaluator sign and date this form in the space provided.

Signatures:

I, the undersigned, acknowledge the successful completion of the above performance task(s) under the supervision of an NCCER certified Performance Evaluator.

Candidate/Trainee: _____ Date: _____

Performance Evaluator: _____ Date: _____

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Performance Profile Sheet

Module 44111 has no Performance Profile Sheet;
performance testing is not required for this module.