

CTE Skill Certificate Test Performance Documentation

This document must be submitted to the test coordinator at the end of testing each trimester/semester.

Instructor's Name: _____ Course: Network +
School: _____ Test Number: 888
Students in course: _____ Date: _____
Students tested: _____
Students who passed performance objectives at or above 80%: _____

No Performance Documentation is currently required.

You must mark **YES** on the performance for the students to receive a certificate even though there is not a required performance for this course.

Instructor's Signature: _____ Date: _____