Skill Verification DocumentationCTE Skill Certificate Program

A separate packet MUST be submitted for each class.

Packets missing information, not signed, or submitted counter to directions will not be considered.

Test Name:	ASE Auto Automatic	Transmission/Transaxle Student	Certification	Test #: 9582	
Instructor's Name:		Test Date: Class period:		eriod:	
School:		District:			
# Students in course:		# Students tested:	# Students	# Students passed:	
To verify results for this test, the following must be included:					
1. Required Skill Verification Documentation Sheet					
2. Copy of the YouScience Skill Certificate Industry Test Report					
3. Copy of Automotive Service Excellence Certificate from National Institute of ASE (alphabetized)					
Please remember, a separate packet MUST be submitted for each class.					
Documentation must be reviewed by CTE Director.					
I verify that the attached information includes the required information for the specific course above.					
CTE Director's Signature:		D	ate:		

