Required Performance Documentation
Skill Verification Document
CTE Skill Certificate Program

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

Test Name:_____Test #: _____

Instructor's Name:_____Test Date: _____

School:_____District: _____

Students in course: _____

Students tested: _____

Students who passed the *online test* at or above 80%: _____

Students who passed each p*erformance skill* at or above 80%: _____

Students who earned a CTE skill certificate: _____

Students who did not test: _____
∗   Please attach the names of students who did not test and the reason for not testing.

This performance skill verification document will be kept on file by the teacher for two years. (Check the documentation method used to verify that students passed each performance skill at or above 80%).

Class period summary score sheet
Recorded and identified in the class grade book

This is to verify that students passed each performance skill listed in the strands and standards for this course at or above the 80% level.

Instructor's Signature:_____Date: _____

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