

**PERFORMANCE EVALUATOR EVALUATION FORM**

Performance Evaluator \_\_\_\_\_

OBSERVATIONS	YES	NO	COMMENT
Conducted PVs according to NCACP policy and procedures			
Ensured necessary tools/materials are available and in good working order			
Ensured evaluation site is adequate for tasks to be performed			
Performance Evaluator conducted PVs in a professional manner			
Ensured proper identification of each participant participating in the PV			
Evaluated one participant at a time			
Ensured the participant(s) understand the tasks they are to perform			
Noted the start and end time for <i>each</i> task			
Proper safety practices observed			
Ensured participant correctly completes all necessary forms before leaving evaluation site			
Completed all rating forms after participant has left the PV site			
Completed each section of the PV submission form accurately and completely			

Additional Comments

Observer \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_