

## CANDIDATE'S ASSESSMENT SUMMARY RECORD

<b>ASSESSMENT CENTRE</b>	XPRIENZ PTE LTD		
<b>Competency Unit</b>			
<b>Candidate Name (As in NRIC)</b>			
<b>Candidate's NRIC</b>		<b>Assessment Date</b>	

Competency Element	Assessment Method Indicate C or NYC			Overall Result
	MCQ	PP	OQ	Indicate C or NYC
1. Practise Good Personal Hygiene	C	C	C	C
2. Use Safe Ingredients	C	C	C	C
3. Handle Food Safely	C	C	C	C
4. Store Food Safely	C	C	C	C
5. Maintain Cleanliness of Utensils, Equipment and Services/Storage Areas	C	C	C	C

PP : Practical Performance / MCQ : Multiple-Choice Questions / OQ : Oral Questioning

This candidate has been assessed as:

**COMPETENT**



**NOT-YET-COMPETENT**

☐

<b>Assessor Name</b>			
<b>Assessor's Signature</b>		<b>Date</b>	

  

<b>Candidate's Signature</b>	✓✓✓	<b>Date</b>	
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***By signing, the candidate is agreeing to accept the overall assessment outcome***

Feedback on outcome by Assessor/ Feedback by candidate:
