

CANDIDATE'S ASSESSMENT SUMMARY RECORD

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|-----------------------------|-----------------|-----------------|--|
| ASSESSMENT CENTRE | XPRIENZ PTE LTD | | |
| Competency Unit | | | |
| Candidate Name (As in NRIC) | | | |
| Candidate's NRIC | | Assessment Date | |

| 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

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|----------------------|--|------|--|
| Assessor Name | | | |
| Assessor's Signature | | Date | |

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|-----------------------|-----|------|--|
| Candidate's Signature | ✓✓✓ | Date | |
|-----------------------|-----|------|--|

By signing, the candidate is agreeing to accept the overall assessment outcome

Feedback on outcome by Assessor/ Feedback by candidate:

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