



# GFSTC SKILL SHEET REVIEW WORKSHEET

<b>Monitor Name</b>	<b>GFSTC ID # or SS#</b>	<b>Approved Site Location</b>	<b>LEVEL TESTED</b>	<b>DATE</b>

Candidate Number	Candidate ID # or SS#	Candidate Name	STATION(S)						P/F	COMMENTS <small>(Walk-ons, Redo, Withdrew, Skills only, etc.)</small>
			1	2	3	4	5	6		
1			1	2	3	4	5	6		
2			1	2	3	4	5	6		
3			1	2	3	4	5	6		
4			1	2	3	4	5	6		
5			1	2	3	4	5	6		
6			1	2	3	4	5	6		
7			1	2	3	4	5	6		
8			1	2	3	4	5	6		
9			1	2	3	4	5	6		
10			1	2	3	4	5	6		
11			1	2	3	4	5	6		
12			1	2	3	4	5	6		
13			1	2	3	4	5	6		
14			1	2	3	4	5	6		
15			1	2	3	4	5	6		
16			1	2	3	4	5	6		
17			1	2	3	4	5	6		
18			1	2	3	4	5	6		
19			1	2	3	4	5	6		
20			1	2	3	4	5	6		
21			1	2	3	4	5	6		
22			1	2	3	4	5	6		
23			1	2	3	4	5	6		
24			1	2	3	4	5	6		
25			1	2	3	4	5	6		

### LEGEND

○ = CANDIDATE @ STATION  
 ● = COMPLETED STATION  
 ⊖ = REDO @ STATION

⊖ = @ REDO STATION  
 ● = PASSED REDO @ STATION  
 ⊖ = FAILED REDO @ STATION

P = PASS  
 F = FAIL

W = WALK-ON  
 R = REDO

W/D = WITHDREW  
 S/O = SKILLS ONLY

By signing below, I have read and understand the responsibilities/ guidelines that have been set by GFSTC for evaluators during skill testing.

<b>Evaluator Name</b>	<b>Contact Number</b>	<b>GFSTC ID or SSN</b>	<b>Evaluator Signature</b>

COMMENTS: \_\_\_\_\_

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The skills testing event was conducted by following the policies and procedures set by GFSTC.

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Test Monitor/Lead Evaluator (Print Name)

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Test Monitor/Lead Evaluator Signature

Attach Pre-requisite Form, Candidate Station Worksheets and Evaluator/Monitor Responsibilities sign in sheet to this form.