Evaluator’s Recommendation  
(Initial only one line as appropriate)

1) The tasks initialed and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. The trainee has successfully performed all tasks in the PTB for the position. I have completed the Final Evaluator’s Verification section and recommend the trainee be considered for agency certification.

2) The tasks initialed and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. However, opportunities were not available for all tasks (or all uncompleted tasks) to be performed and evaluated on this assignment. An additional assignment is needed to complete the evaluation.

3) The trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.

4) The individual is severely deficient in the performance of tasks in the PTB for the position and additional training, guidance, or experience is recommended prior to another training assignment.

Record additional remarks/recommendations on an Individual Performance Evaluation, or by attaching an additional sheet to the evaluation record.

Evaluator’s Signature: _______________________________ Date: _______________________________

Evaluator’s Relevant Qualification (or agency certification): ________________________________

Additional Evaluation Record Sheets can be downloaded at www.nwcg.gov/pms/taskbook/taskbook.htm