



Performance Verification Packet

Foreman

This performance verification is designed as one method to evaluate job skills and safe work habits of a participant. The performance of the participant must be evaluated by an NCCER certified evaluator, at an NCCER authorized assessment site and be approved by an NCCER accredited assessment center. For a Certified Plus credential, the version of the assessment and performance verification must be the same.

Last Updated: February 2011
NCCER
13614 Progress Blvd • Alachua, FL 32615
1-888-622-3720

NCCER PERFORMANCE VERIFICATION HOW TO SHEET FOREMAN

Participant

- 1) Print your last name, first name, and social security number.
- 2) Print your company name, current employer, and the state where your employer's main office is located.
- 3) In the space provided for "Participant Signature," sign your name and enter the date you signed the form.

Performance Evaluator

- 1) In the space provided for "Site Code," enter the postal zip code of the location where the performance verification is being conducted.
- 2) In the column provided for "Date," enter the date the participant completed each of the tasks. This date is important because there may be times a participant does not complete the performance verification in one day.
- 3) In the space provided for "Performance Evaluator," sign your name.
- 4) In the space provided for "Date," next to your signature, list the date the participant successfully completed all of the tasks.

Administrator

- 1) In the space provided for "Administrator," sign your name. Your signature indicates that the performance evaluator is certified to conduct this performance verification and that it was conducted within the guidelines of the NCCER. Do not use a signature stamp.
- 2) In the space provided for "Date", next to your signature, list the date that this performance verification form is being sent to the NCCER for entry into the National Registry.
- 3) In the space provided for "Accredited Assessment Center," print the name of the accredited assessment center that is conducting this performance verification.

NCCER PERFORMANCE VERIFICATION CANDIDATE SUMMARY

FOREMAN

Objectives

The candidate will demonstrate the ability to conduct effective tool box meetings, show leadership skills, perform planning and scheduling skills, and perform administrative duties.

Scope

This Performance Verification provides a means to observe and evaluate competencies in the following areas:

- Administration
- Planning & Scheduling
- Leadership & Supervision
- Safety

Materials Required

- Paper
- Pencil

Time Required

4 hours

Tasks

Evaluator will provide necessary job-specific details for each task.

- **Administration**
 - Quality control
 - Relay info to crew & superiors
 - Expectations for the job
- **Planning and Scheduling**
 - Change in timeline due to material or budget change
 - Create viable solutions
- **Leadership/supervision**
 - Demonstrate written and oral communication skills
- **Safety**
 - Conduct an effective tool box meeting
 - Note hazards in job site
 - Goals for the day
 - Discuss PPE
 - Discuss shipments/changes to site
 - Fill out job hazard analysis form

**NCCER PERFORMANCE VERIFICATION SCENARIO
FOREMAN**

Foreman Performance Verification Candidate Information

Leaks have been found in some storage drums stored on the job site. Ask the evaluator the questions that need to be answered to complete the attached Job Hazard Analysis Form.

Due to a scheduling conflict, the electricians won't be able to be on site until Week 13, and the plumbers are available to start work tomorrow. Make the necessary adjustments to the attached schedule.

There has been an ongoing problem with the company's tools being left out. Discuss what needs to be done during a safety training session that will be conducted with the evaluator acting as the crew.

6 WEEK PLANNING SCHEDULE

Date	Completion Date 04-17-2010																												
PROJECT:	Week 10							Week 11							Week 12							Week 13							
ACTIVITY	March							March							March							March							
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	
	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	
Small Office Building																													
1st floor Area																													
Interior Wall Framing - completed	X	X	X																										
Install Door Frames		X	X	X																									
Plumbing Piping Install - above ceiling complete	X																												
Duct Install- above ceiling complete	X																												
Electrical Install - above ceiling complete	X																												
Plumbing Piping Install @ walls and bathrooms											X	X				X	X												
Duct Install @ walls and bathrooms				X	X																								
Electrical Install @ walls and bathrooms								X	X	X	X	X			X														
Install Drywall - one side											X				X	X	X												
Close-up Inspections																		X	X		X								
Complete Drywall - both sides																						X	X	X	X				
Finish Drywall																							X	X	X				
Paint Drywall - 2 coats																									X				
Install Ceramic Tile - bathrooms																													
Install Ceiling Grid																													
Install Lights																													
Install HVAC Diffusers, etc.																													
Install Sprinkler Heads																													
Install Ceiling Tile																													
Install Floor Coverings																													
Install Door and Hardware - T.partitions																													
M.E.P Trim-out - Fixtures, etc.																													
Building Inspections																													
Fire Marshall Inspections																													
Pre- Punchlist Work																													
Owner/Architect Inspections																													
Complete Punchlist																													
Substanatial Completion																													
Final Punchlist Completion																													
Project Completion																													

JOB HAZARD ANALYSIS FORM

Job Title:

Date of Analysis:

Job Location:

Conducted by:

PPE:

Staffing:

Tools, Materials and Equipment:

Duration:

Step	Hazards	Quality Concern	Environmental Concern	New Procedure or Protection

**NCCER PERFORMANCE EVALUATOR CHECKLIST
FOREMAN**

Date Completed	Task To Perform
__-__-__	1. Administration <ul style="list-style-type: none">• Completed forms• Gathered information• Relayed information to the crew related to quality control
__-__-__	2. Planning & Scheduling <ul style="list-style-type: none">• Changed timeline for material or budget changes<ul style="list-style-type: none">◦ Acceptable solutions<ul style="list-style-type: none">◦ Stack subcontractors◦ Work Saturdays• Created viable solutions
__-__-__	3. Leadership <ul style="list-style-type: none">• Demonstrated oral communication skills• Demonstrated written communication skills
__-__-__	4. Safety <ul style="list-style-type: none">• Conducted a safety meeting<ul style="list-style-type: none">◦ Noted hazards on the job site◦ Communicated the goals for the day◦ Discussed PPE◦ Discussed shipments and/or changes to the job site• Filled out a job hazard analysis form related to the storage drum leaks<ul style="list-style-type: none">◦ Discussed securing the spill area to contain the spill◦ Asked what kind of material was spilled◦ Asked who was the responsible party and obtained contact information for the responsible party◦ Did a risk analysis◦ Set up new procedures based on the risk analysis

NCCER PERFORMANCE VERIFICATION INSTRUCTIONS

FOREMAN

Foreman Performance Verification Instructions

Give the candidate the candidate information sheet, candidate schedule, and JHA form provided in the packet.

Administration/Safety:

The candidate will complete the JHA by asking the evaluator questions which should include those listed on the Evaluator Checklist. Once the candidate has asked the questions, he/she will fill out the JHA accordingly.

The candidate will prepare and conduct a safety training meeting based on the information given in the scenario. The evaluator will be the “crew” for the meeting. The candidate should include all of the points listed on the Evaluator Checklist.

Planning & Scheduling:

The candidate will correct the schedule according to the candidate information. Check the candidate’s results against the Evaluator’s Schedule.

Leadership:

The communication skills will be evaluated during the Administration and Safety tasks.

Conclusion:

Gather all material (candidate information sheet, schedule, JHA, and any scratch paper) from candidate at the end of the performance verification.



PERFORMANCE VERIFICATION FORM

FOREMAN PVFORE46

Candidate information		
_____	_____	_____
Last Name	First Name	SSN or SGN
_____	_____	_____
Employer/Company Name	State	Site Code
Evaluator		
_____	_____	_____
Last Name	First Name	SSN or SGN

Task Number	TASK	DATE (MM/DD/YY)	START TIME	END TIME
01	Administration (46101-11)			
02	Planning & Scheduling (46101-11)			
03	Leadership (46101-11)			
04	Safety (46101-11)			

Consent/Release: I, the undersigned, do hereby authorize the National Center for Construction Education and Research (NCCER) to release the information and results attained through the administration of the National Craft Assessment and Certification Program (NCACP) to the organization referenced below, and acknowledge that the employer noted above is my present employer.

Accredited Assessment Center: _____

Participant: _____ **Date:** _____

Performance Evaluator: _____ **Date:** _____

Administrator: _____ **Date:** _____