



ce of Training and
certification

New Jersey Division of Fire Safety

PRACTICAL SKILLS EXAMINATION REPORT

Skill sheet#

FM-15

Certification Title

Fire Official

Community Risk reduction

Evaluate risk management program

Applicant Information

Candidate name

DFS ID #

Course #

Evaluation

Standard:
NFPA 1037, 2016 Edition
4.3.9

Task
Included in 4.2.1.

Conditions and Outcome
. The candidate will complete this task with a minimum of 2 items answered correctly

Number

Task Steps

First Test

Retest #1

Retest #2

Pass

Fail

Pass

Fail

Pass

Fail

Final Test Result for Entire Task

Evaluator signature & comments, Test #1

Evaluator signature & comments, Retest #1

Evaluator signature & comments, Retest #2

Evaluator signature

Date

Evaluator signature

Date

Evaluator signature

Date

Candidate signature & acknowledgement,
Test #1

Candidate signature & acknowledgement,
Retest #1

Candidate signature & acknowledgement,
Retest #1

By my signature below I acknowledge I have read
and understood the evaluation results and
evaluator comments

By my signature below I acknowledge I have read
and understood the evaluation results and
evaluator comments

By my signature below I acknowledge I have read
and understood the evaluation results and
evaluator comments

Candidate signature

Date

Candidate signature

Date

Candidate signature

Date