MWC: PERFORMANCE MEASURE SCORES: MODULAR PROGRAMS

Course:_____ Date:_____ Location:_____

*Please fill in the scores of each trainee in the blanks provided. Please write the number of questions the trainee answered correctly over the number of possible questions. Example: 15/25. If only one Performance Measure is used, put N/A in the other column. Thank you.

TRAINEE ID NUMBER	NPG	ERG