

**SKILLSUSA PENNSYLVANIA
PROOF OF TRAINING FORM
Power Equipment Competition**

Note: Failure to complete this form will disqualify the contestant from the competition. A copy must be given to the Contest Chairperson on the day of competition.

Contestant Name: _____

Check one: ___Secondary ___Postsecondary _____School

This is to certify that the above named contestant has received training and is competent in the safety and operation of the following tools and performance of the job skills which may be included as part of the competition. Every category must be checked to be eligible to compete.

___VOA meter ___Ignition tester

___Hand tools as listed in the SKILLSUSA Championships Technical Standards

Instructor's signature Print name of instructor Date_____

Contestant's signature Print name of contestant Date_____

Reviewed and Approved by: _____
Director/Administrator Date
