

Skills Assessment:**Employee Name:****Assessor Name:****Date of Assessment:****Practical Skills Assessment:**

(✓ Check if satisfactorily demonstrated)

Skill	Demonstrated Correctly	Comments
Proper Hand Hygiene		
Correct Donning and Doffing of PPE		
Accurate Weighing and Measuring of Ingredients		
Use of Appropriate Equipment for Specific Preparations		
Proper Technique for Mixing, Blending, Triturating		
Correct Labelling and Documentation		
Adherence to Assigned Formulation Instructions		
Cleaning and Decontamination of Work Area		
Identification and Management of Errors		
Application of QA Verifications (e.g., weight checks, visual inspection)		

Overall Assessment:

- ☐ Competent — no retraining required
- ☐ Competency Gaps Identified — retraining required

Assessor's Notes: *(Areas of excellence or need for improvement)***Employee Acknowledgement:**

I acknowledge that my skills assessment was conducted and results have been reviewed with me.

Employee Signature:**Date:****Assessor Signature:****Date:**