



WellCAP Plus Training Provider Pre-Test Certification Form

Instructions: This form is to be used by an accredited WellCAP Training Provider to document the results of a WellCAP Plus entrance examination in accordance with WellCAP Plus Accreditation Procedures. The original test is to be kept on file by the Test Provider. This form should be kept with the student's WellCAP Plus course record.

Student Name:	
Date of Test:	
Location:	
Name of Test Provider:	
WellCAP/WellCAP Plus Program Number	
Test Results:	<input type="checkbox"/> 80 percent or higher <input type="checkbox"/> Less than 80 percent

I hereby certify that the above information is correct and complete and that the test referenced above was provided in accordance with WellCAP Plus requirements.

Authorized Signature _____

Printed Name _____

Date: _____