

**New Jersey Department of Health**  
**HANDS-ON ASSESSMENT**  
**LEAD INSPECTOR / RISK ASSESSOR**

Student Name	Date
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*For the hands-on assessment of the training course, instructors shall rate student performance on a scale of 1-5 (5 being the best). During the hands-on assessment, students shall be required to demonstrate competency in the following areas. Items/procedures must be developed to test each activity. These items/procedures must be submitted to the Department for approval prior to implementation.*

Item	Activity	Rating <i>(Check one number for each)</i>				
		1	2	3	4	5
<b>1. Lead-based paint inspection methods</b>	Inspection strategy					
	Suspect locations					
	Painting history					
<b>2. Lead-based paint testing procedures</b>	Sampling and inspection guidelines					
	Testing methodologies					
	Random testing procedures					
<b>3. Preparation of final inspection report of test results</b>	Interpreting test results					
	Components of reports					
	Recommendations					
<b>4. Dust and soil clearance sampling methodologies</b>	Dust sampling methodologies					
	Soil sampling methodologies					
<b>5. Visual inspection</b>	Categorization of condition					
	Risk assessment of hazard					
<b>6. Preparation of risk assessment and final inspection report</b>	Components of report					
	Recommendations					
	Implementation schedule for report					
<b>Total Each Column:</b>						
<b>Total Score (add total from each column):</b>						
<b>Multiply total score by this number (round to nearest whole number):</b>		<b>X 1.25</b>				
<b>Score:</b>						
<b>Indicate pass or fail (must have at least 70% to pass):</b>		<input type="checkbox"/> Pass <input type="checkbox"/> Fail				

Rater (print)	Agency Number
Rater Signature	Date