Template for comments and observations		Date:	Laboratory Name:	Lab Code:
Individual/Reviewer(s) conducting the quiz:			Program	
Laboratory Staff present/participating in quizzing:				
Quiz Name:			Test Score:	
1	2	3	4	5
Name of Laboratory Staff Answering	Question posed to the laboratory	Comments by the reviewer	Questions/comments requiring follow-up by the on-site assessment team (if needed)	Assessment Team Comments (if required)
				-