**ABDO Case Record form for the Pre-Qualification Period Portfolio**

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| --- | --- | --- | --- | --- | --- | --- |
| **Case number:** |  5 | 1 |  |  | **ABDO Membership number** |  |
|  |  |
| **Category:** | Manufacturing visit |  |

|  |
| --- |
| Manufacturer address: |
| Manufacturers stamp: |
| Authorised manufacturing signature: Date of Signature: |
| Name of Signatory: |
| Manufacturing areas covered on this visit (please initial)SurfacingGlazingTints/CoatsFrame manufactureNB where areas are covered by video or presentation, please add title and date viewed |
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**ABDO Case Record form for the Pre-Qualification Period Portfolio**

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| --- | --- | --- | --- | --- | --- | --- |
| **Case number:** |  5 | 1 |  |  | **ABDO Membership number** |  |
|  |  |
| **Category:** | Manufacturing visit |  |

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| **Additional information (additional pages can be added if required)** |
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| **Additional information (additional pages can be added if required)** |
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| **Supervisor/Lecturer Declaration:** |
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| **Case number:** |  5 | 1 |  |  | **ABDO Membership number** |  |

I confirm that the trainee has attended this visit and that the report I have checked is entirely their own work.

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Signed by Supervisor or Lecturer Date Checked and Signed |