Culinary Management (Year Long)
Test Number: 347

CTE Skill Certificate Test Performance Documentation

This document must be submitted to the test coordinator at the end of the year.

Instructor’s Name: __________________________  Course: Culinary Management
School: ___________________________________  Test Number: 347
# Students in course: _________  Date: _________________
# Students tested: ___________  
# Students who passed performance objectives at or above 80%: __________

This is to verify that the students marked YES on performance accomplished the following performance

1. Students will demonstrate competency with all the knife cuts listed in Strand 1 Standard 4.

2. Students will complete a sanitation and food safety training equivalent to that of a food handler’s permit or certificate.

3. Students will create a short presentation explaining one culinary math concept from Strand 3. See FCCLA Star Event Applied Math for Culinary Management for additional resources. (This can be a power point, oral or written presentation.)

4. Students will create a menu including menu descriptions incorporating good nutritional choices. May be included in student portfolio.

5. Students will create a marketing strategy for a food related item. Implementation is optional. See FCCLA Star Events Food Innovations or Entrepreneurship as a resource.

6. Students will prepare a breakfast dish that includes one or more of the following: eggs, meat, dairy, or breakfast breads.

7. Students will prepare and plate a produce food item.

8. Plan, calculate cost, prepare and present a bakery item for a minimum of 30 people.

9. Students will prepare various grains, potatoes and/or legumes.

10. Students will prepare a cut of meat, poultry and/or seafood using an appropriate cooking method.

Each performance is documented and kept on file by the teacher for one year.

(Check the documentation method used)
☐ Class period summary score sheet
☐ Recorded and identified in the class grade book

Instructor’s Signature: ___________________________ Date: _______________