

Detailed Work Completion Assessment Sheet

Project Information

Project Name	_____
Work Order No.	_____
Date of Assessment	_____
Location/Site	_____
Assessed By	_____

Scope of Work

Detailed description/list of the work covered by this assessment.

Work Completion Checklist

Task/Activity	Status	Comments/Observations
_____	~ Completed ~ Pending	_____
_____	~ Completed ~ Pending	_____
_____	~ Completed ~ Pending	_____

Overall Assessment & Remarks

Assessor's Signature & Date

Authorized Supervisor/Manager Signature & Date

- This document serves as an official record of work completed for a specific project or task.
- Ensure all relevant fields, comments, and signatures are accurately filled out.

- Any incomplete or pending items should be clearly highlighted in the checklist and remarks.
- Retain a copy of this document for project records and future reference.
- Assessment should be conducted and signed by authorized personnel only.