

**DEPARTMENT OF FORENSIC SCIENCE
EXTERNAL PROFICIENCY TEST TRACKING SHEET**

Sample ID:

Examiner:

Section:

Laboratory:

Date Received from Manufacturer:

Due to Supplier:

Distributed:

Due Internal:

Returned to QAC (Completion Date):

Results Provided to Supplier - Mail:

Fax:

Preliminary Report Received:

Final Report Received:

Reviewed with Program Manager:

Acceptability of Results:

Comments:

UNCONTROLLED
COPY