

**Tri-County Technical College**  
Office Systems Technology Program  
Technical Advanced Placement (TAP)

Competency Verification & Teacher Recommendation Form

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**TCTC Course: AOT 105/110 (Keyboarding/Document Formatting)**

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**SECTION I (To be completed by the student)**

Please complete this section of the form and give it to your Business Education teacher.

Your Name (PLEASE PRINT): \_\_\_\_\_

Address: \_\_\_\_\_ SSN: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

High School: \_\_\_\_\_ Grade: \_\_\_\_\_

**SECTION II (To be completed by the teacher)**

I verify that this student has mastered the major course competencies listed below (signifying mastery of all sub competencies shown on the course syllabus dated June 2008 and provided/reviewed during the annual Business Education Articulation Committee meeting), and therefore, I recommend this student to take the TAP examination.

Major Course Competencies

1. The student will be able to operate the letter and number keys with correct fingering.
2. The student will be able to apply basic skills to the production of letters, tables, and reports.
3. The student will be able to type at least 35 wpm for 5 minutes with no more than 5 errors on straight copy material.
4. The student will be able to answer theory questions about differences in type, proper line spacing and margins, letter styles, spacing before and after punctuation marks, etc.

Teacher Name (PLEASE PRINT): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name of high school course(s) in which this student gained the required competencies for possible TAP credit:

\_\_\_\_\_

Date of course completion, or expected completion: \_\_\_\_\_

Comments (if applicable): \_\_\_\_\_

\_\_\_\_\_

**Please make a copy of this form for your records and mail the original to: Ms. Melinda Zeigler, Business and Public Services Division Secretary, Tri-County Technical College, P.O. Box 587, Pendleton, SC 29670.**