

Woods II – Medicine Cabinet Evaluation

Name _____

Date _____

1. Parts:

Top

10	9	8	7	6	5	4	3	2	1	
							<i>Off by 1/8" or more</i>			

Back and Screw Rails

10	9	8	7	6	5	4	3	2	1	
							<i>Off by 1/8" or more</i>			

Shelf (ves)

10	9	8	7	6	5	4	3	2	1	
							<i>Off by 1/8" or more</i>			

Crown molding

10	9	8	7	6	5	4	3	2	1	
							<i>burns, inconsistent</i>			

2. Joints:

Carcase

20	18	16	14	12	10	8	6	4	2	
							<i>off by 1/8" or more</i>			

Face Frame

20	18	16	14	12	10	8	6	4	2	
							<i>off by 1/8" or more</i>			

Door

20	18	16	14	12	10	8	6	4	2	
							<i>off by 1/8" or more</i>			

3. Fit

50	45	40	35	30	25	20	15	10	5	
					<i>Out of square, 1/16 " + gap in joints,</i>					

4. Finish

50	45	40	35	30	25	20	15	10	5	
			<i>Rough finish,</i>		<i>Rough surface, sanding marks</i>					

Total Score _____

