

F-01 - ASSESSMENT COVER SHEET

Note: This form is to be used by: the **student** to submit assessment & by the **Assessor for Academic Integrity Review**

Student Name:		Student ID:	
Course Name: CourseCode:		Trainer Name:	
Unit Code: Unit Name:		Intake /Batch:	

STUDENT DECLARATION

I HEREBY DECLARE THAT, this is my **1st Submission** **2nd Submission** **Reassessment**

- I declare that all the assessment parts completed for this unit are my own work.
- To the best of my belief, no part of this assessment has been copied from any other student's work or from any other source except where acknowledgement is made in the text.
- No part of this assessment has been written for me by any other person except where such collaboration has been authorized by the assessor concerned and where acknowledgement is made in the text.
- No part of this assessment has been previously submitted as an assessable item, except where authorized by the trainer concerned and where acknowledgement is made in the text.
- I am aware of the reassessment options and right to appeals.
- I have retained a copy of this assessment.
- I understand all terms and conditions and acknowledge that I have signed all Learner Declarations in the Student Assessment Booklet.

Student's signature: _____

Submission Date: _____

ASSESSOR'S DECLARATION

I Declare that I have conducted a fair, valid, reliable and flexible assessment with this student and I have provided appropriate feedback and reasonable adjustments, where applicable. I have also explained about the reassessment options and appeals right available to the student.

Task No.	Assessor's Comments	Result: S = Satisfactory NS = Not Satisfactory DNS = Did Not Submit
Assessment Task 1		S / NS / DNS
Assessment Task 2		S / NS / DNS
Assessment Task 3		<input type="checkbox"/> S / <input type="checkbox"/> NS / <input type="checkbox"/> DNS
Assessment Task 4		<input type="checkbox"/> S / <input type="checkbox"/> NS / <input type="checkbox"/> DNS
Assessment Task 5		<input type="checkbox"/> S / <input type="checkbox"/> NS / <input type="checkbox"/> DNS
Final Outcome for unit		<input type="checkbox"/> C / <input type="checkbox"/> NYC

Assessor's additional comments:

Assessor's Name: _____ Signature: _____ Date: _____

ACADEMIC INTEGRITY REVIEW (INTERNAL AUDIT)

I declare that I have conducted an accurate Academic Integrity Review of the student's assessment and that the above results/outcomes are correct.

Assessor's Name: _____ Signature: _____ Date: _____