

ASSESSMENT COVER SHEET

Student Number:			
Student Name: <i>(optional)</i>			
Unit Code & Name:			
Lecturer:			
Tutor:			
Due Date:		Word Count:	
Assessment Task: <i>(in full)</i>			

CHECKLIST FOR SUBMISSIONS

Your assessment task should meet the following requirements prior to submission. If it does so, please tick the checkboxes below.

	<i>Task submitted on A4 paper</i>		<i>Page numbers are recorded</i>
	<i>3-4cm margin provided</i>		<i>Student has a copy of this task</i>
	<i>Double-line spacing</i>		<i>Declaration below is signed & complete</i>
	<i>Pages firmly stapled together</i>		<i>Word count is recorded</i>

DECLARATION

I certify that this assignment is my own work and that due acknowledgement is made of sources and direct quotes. I certify that I am aware of my obligations under provisions for honest conduct and that I am also aware of Campion College policies on plagiarism and academic misconduct.

Student Signature:

Staff Signature:

[Office Stamp]

ASSIGNMENT SUBMISSION (Student Receipt)

As proof of submission, please retain this receipt and a copy of your assessment.

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