

## ASSESSMENT COVER SHEET

### STUDENT DETAILS

STUDENT NAME (First and Last Name) \_\_\_\_\_ / \_\_\_\_\_

STUDENT CONTACT DETAILS

Contact Number

Email

### SUBMISSION DETAILS

QUALIFICATION \_\_\_\_\_

TERM of the YEAR

TERM 1 (Jan)

TERM 2 (Apr)

TERM 3 (Jul)

TERM 4 (Oct)

ASSESSMENT TYPE

(ONE cover sheet per assessment)

In-Class Activity

Late Submission

Re-Submission

Work Placement Logbook  
(Assessment Kit)

Late Submission

Re-Submission

Exam/Quiz

Re-sit Whole Exam

NAME OF ASSESSOR

DUE DATE

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

### STUDENT DECLARATION

I confirm that this is my own work and has not been plagiarised from any sources or completed by any other person than the individual stated above. I understand that there are penalties if this assessment is submitted after the stated due date, unless I have otherwise received approval for an extension to the due date. I have kept a copy of my work (applicable to assignments only). I understand this assessment will not be returned to me. I accept that if my assessment is kept on campus it will only be kept for 2 weeks and in this time I can request to view my marked assessment.

Student Signature: \_\_\_\_\_ Date of Submission: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

### ASSESSOR / STUDENT SERVICES TEAM USE ONLY

### ASSESSMENT OUTCOME

NAME OF ASSESSOR: \_\_\_\_\_

OUTCOME:

Satisfactory:

I confirm that I observed the learner demonstrate the skills with the elements, performance criteria, critical aspects for assessment and required skills for this assessment task.

Not Yet Satisfactory

OVERALL FEEDBACK:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

I have received feedback from my Assessor

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