

YOGA ASSESSMENT COVER SHEET - Theory

STUDENT DETAILS

STUDENT NAME (First and Last Name) _____

STUDENT CONTACT DETAILS

Contact Number _____

Email _____

SUBMISSION DETAILS

QUALIFICATION Cert IV in Yoga Teaching

Diploma of Yoga Teaching

TERM of the YEAR

TERM 1 (Jan)

TERM 2 (Apr)

TERM 3 (Jul)

TERM 4 (Oct)

ASSESSMENT TYPE

(ONE cover sheet per assessment)

Assessment Kit

Written Questions

Project Activity

Case Study

Scenario

Theory Exam

Late-submission

Re-submission

Re-sit Whole exam

NAME OF ASSESSOR _____

DUE DATE _____ / _____ / _____

STUDENT DECLARATION

I confirm by signing below, that as a student of the Australian College of Sport and Fitness, the work I have submitted is *completely my own* and has not been plagiarised from any sources or completed by any other person than the individual stated above. I have kept a copy of this assessment for my own records (excluding in class written exam). 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 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: _____