

# GROUP ASSIGNMENT COVER SHEET



Please complete and attach this form to your assignment before handing it in or placing it in the Assignment Drop point beside the Student Services Counter 02-02, Level 2 of SMa City Campus.

1	<u>Surname</u>	<u>Given name/s</u>	<u>Student number</u>
2	<u>Surname</u>	<u>Given name/s</u>	<u>Student number</u>
3	<u>Surname</u>	<u>Given name/s</u>	<u>Student number</u>
4	<u>Surname</u>	<u>Given name/s</u>	<u>Student number</u>
5	<u>Surname</u>	<u>Given name/s</u>	<u>Student number</u>
<u>Lecturer's first name and surname</u>		<u>Lecture day</u>	<u>Full time/Part time</u>
<u>Assignment number</u> (i.e. 1,2,3 or short answer)		<u>Due date</u>	<u>Date submitted</u>

If the given name by which your lecturer knows you differs from your name on university records, you should indicate both names above.

## Your assignment should meet the following requirements.

Please confirm this by ticking  the boxes before submitting your assignment.

- My assignment:  is double-spaced and clearly legible  
 is written on one side of page only  
 has the pages numbered  
 has a wide margin (4 cm) on left-hand side of page  
 has the first page clearly labelled with my full name, unit code and tutor's full name.
- and  I have retained a copy of my assignment  
 I have completed and signed the declaration below

**All forms of plagiarism, cheating and unauthorised collusion are regarded seriously by the University and could result in penalties including failure in the unit and possible exclusion from the University. If you are in doubt, please contact the Unit Coordinator**

## Declaration

Except where I have indicated, the work I am submitting in this assignment is my own work and has not been submitted for assessment in another unit.

Signed: \_\_\_\_\_ (On behalf of the group)

OFFICE USE ONLY		
Date received	Marked by	Mark/Grade
Recorded by	Date marked	