Condobolin High School

Assessment Task Cover Sheet

STUDENT NAME:	
SUBJECT:	**TASK NUMBER**:
DATE DUE:	
TOTAL MARKS:	**WEIGHTING:**
CLASS TEACHER/s:	**HEAD TEACHER:**

This task is free from plagiarism and correctly referenced, this assessment is all of my own work.

Student Signature _____

General Feedback:

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Student Receipt of Submission:

(NAME) _____ *submitted his/her (SUBJECT)* _____ *Assessment Task on (DATE)* _____.

Staff Signature: _____