



# ASSESSMENT TASK COVER SHEET

Course \_\_\_\_\_

Student Name \_\_\_\_\_

School \_\_\_\_\_

Date Due \_\_\_\_\_

Assessment Title/Question \_\_\_\_\_

Number of Pages (Not including coversheet) \_\_\_\_\_

Date Handed In \_\_\_\_\_

\_\_\_\_\_  
Signature of Teacher

Result Grade \_\_\_\_\_  
(Optional)

Rank \_\_\_\_\_

Comments \_\_\_\_\_

Marker's Signature \_\_\_\_\_

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**KANDOS HIGH SCHOOL**  
**RECEIPT OF AN ASSESSMENT TASK (Student's Copy)**

Student's Name \_\_\_\_\_

Course \_\_\_\_\_

Teacher \_\_\_\_\_

Assessment Task received by \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

**PLEASE NOTE:**

**\*Students: Detach and keep this receipt for your own record of handing in an assessment task to a staff member other than your teacher.**

**\*Please ensure that you KEEP this RECEIPT for your own records.**