



APPENDICES

APPENDIX 1 KANDOS HIGH SCHOOL

ASSESSMENT TASK COVER SHEET

To be filled in by the student

COURSE _____

STUDENT NAME _____

SCHOOL _____

DATE DUE _____

ASSESSMENT TITLE/QUESTION _____

NUMBER OF PAGES (Not including coversheet) _____

DATE HANDED IN _____

(Signed by Teacher)

RESULT: GRADE _____

RANK _____

(Optional)

COMMENTS _____

MARKER'S SIGNATURE _____



KANDOS HIGH SCHOOL

RECEIPT OF AN ASSESSMENT TASK

(Student's Copy)

Student to fill this in prior to submitting task

Student's Name: _____

Course: _____

Teacher: _____

Assessment Task received by: _____

Signature: _____

Date: _____

Time: _____

Please detach this receipt if the Assessment Task has been handed in to the office and give to Student to keep for their own records. Students are advised to paste their receipt in their workbook.