Supervised Assessment — student information and verification sheet

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| --- | --- | --- | --- |
| Subject |  | School |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of student |  | SACE Registration number |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name of teacher |  |  |  |

All work that students submit for school assessment must be their own, produced without undue assistance from other people or sources.

Teachers who are unable to verify that the final piece of work submitted for assessment is the student’s own work must initiate a breach of rules action, through the SACE coordinator.

|  |  |  |
| --- | --- | --- |
| *Name of supervised assessment:* |  | |
| *Length of supervised assessment:* |  | |
| *Date of supervised assessment:* |  | |
| *Start and finish time:* | *Start time:* | *Finish time:* |
| *Other information regarding conditions for this supervised assessment:* |  | |

**Approved tools/equipment for supervised assessment:** (teacher to compile tools/equipment list)

|  |  |
| --- | --- |
|  | *Handwritten notes – 1 side of one A4 sheet* |
|  | *Examination formula sheet (where appropriate to the subject)* |
|  |  |
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|  |  |

**Student checklist:** (teacher to compile tools/equipment and instruction list)

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| --- | --- | --- | --- | --- | --- |
| Tools/equipment | | Instruction upon task completion | Please indicate that you have completed the task (✓) | | |
| *Examination formula sheet* | |  |  | | |
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|  | |  |  | | |
|  | |  |  | | |
| Signature of student | |  | | | Date |  |
| Signature of parent/guardian | |  | | | Date |  |

(Optional)