



# AUTHENTICITY / PRIVACY FORM

Level \_\_ Internal Assessment 2022

<b>Subject Reference:</b>	<b>Topic:</b>
<b>Supports internal assessment for: Achievement Standard _____ Version ____</b>	
<b>Credits:</b>	

## STUDENT AUTHENTICITY DECLARATION

**Candidate Name:** \_\_\_\_\_ **Teacher:** \_\_\_\_

**NSN number:** \_\_\_\_\_

**Due date and \_\_\_\_\_ time:**

This is to certify that the material submitted for the assessment for the achievement standard listed above is entirely my own work, with the exception of sources/assistance acknowledged in the submitted work. All external contributions are duly acknowledged.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### PRIVACY

Tick this box if you DO NOT wish your work to be used for exemplar purposes or shown to other persons without your permission



## APPLICATION FOR LATE SUBMISSION OF AN ASSESSMENT

### MORRINSVILLE COLLEGE ASSESSMENT POLICY FOR LATE WORK / EXTENSIONS

- i All assessment tasks must be completed by or on the day specified. Late work will not be assessed *unless covered by prior negotiation* with the Teacher/LAL.
- ii Should an **emergency situation** arise (*such as illness, bereavement, family emergency*) which makes it impossible to meet specified deadlines, students may apply to the TIC/LAL for an emergency time extension. Such applications should be **in writing** on the **first day of returning to school following the absence**. Any application must provide sufficient grounds to justify such dispensation. Applications based on health grounds may require a **medical certificate**.

Candidate Name: \_\_\_\_\_ Teacher code: \_\_\_\_\_

NSN number: \_\_\_\_\_

Subject: \_\_\_\_\_

Level: \_\_\_\_\_

Due date and time: \_\_\_\_\_

Reason(s) an extension is being sought: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List any supporting documentation provided:

- \_\_\_\_\_
- \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This sheet must be handed to the LAL or TIC with any relevant supporting documentation.**

<b>Decision:</b>	Approved	New date:	Not approved
Reason(s):			
HOD/TIC signature:		Date:	
<b>Once all aspects have been completed, a copy of this form must be given to the LAL</b>			