

University of Brighton

Assignment Report Form

Please complete the white sections of the form, print it (double-sided if possible), sign it below and attach the complete form to your assignment.

number:	Us	ser name:		
Family / Surname:	Fi	irst Name:		
Course:			FT PT T	
Module Name:	М	lodule Code:		
Assignment Title:	Di	ue Date:		
Assignment Tutor:	fo	ate requested or extension f applicable):		
I confirm that this submission in its entirety is my own work, and that all sources are correctly attributed. I understand that assignments may be submitted to the JISC Plagiarism Detection Service and other Academic Misconduct checks.				
Student Signature:				

All assignments received will be given a unique receipt number. Your unique receipt will be emailed to your University of Brighton email address. Your unique number must be quoted to the school office staff to follow up any queries.

If you are handing in an assignment after the deadline and you have grounds for requesting an extension, please submit an Extension Request Form via the School Office

Student number:				
Family / Surname:		First Name:		
Markers comments for completion by tutor	All marks are provisional until ratified by the Examination Board		Mark:	
Name of Marker:				
Signature of Marker:				