ASSIGNMENT/ASSESSMENT ITEM COVER SHEET

Student	Name:				
FIR			ST NAME FAMILY / LA		FAMILY / LAST NAME
Student Number:			Email:		
Course Code				Course Title	
(Example) A B C D 1 2 3 4			(Example)		
			Intro to	Intro to University	
Campus of Study:					(eg Callaghan, Ourimbah, Port Macquarie)
Assessment Item Title:				Due Date/Time:	
Tutorial Group (If applicable):				Word Count (If applicable):	
Lecturer/Tu	itor Name:				
Extension Granted: Yes			No	Granted Until:	
NB: STUD	a copy of your ENTS MAY E			ENT WILL BE RETU	RNED WITHIN 3 WEEKS OF THE DUE DATE O
S	nvironment and	he Faculty of B	Nursing and Midwife		formation Technology, Faculty of Engineering and Built
S "I th	Students within the understand that he School of Edu	he School of Ed t a minimum st ucation; and I h	ducation: andard of correct re	ferencing and academic stood the School of Educa	literacy is required to pass all written assignments in ation Course Outline Policy Supplement, which includes
	academic integ	rity policy avail s assessment i	able from the Policy tem has not been su	Library on the web at <a 000608.html"="" href="https://https:/</td><td>nowledged and is in accordance with the University's http://www.newcastle.edu.au/policylibrary/000608.html cademic credit in this or any other course. I certify that I nother student enrolled in the course.	
DATE	 I acknowledge that the assessor of this assignment may, for the purpose of assessing this assignment: Reproduce this assessment item and provide a copy to another member of the Faculty; and/or Communicate a copy of this assessment item to a plagiarism checking service (which may then retain a copy of the item on its database for the purpose of future plagiarism checking). Submit the assessment item to other forms of plagiarism checking. 				
STAMP HERE	I certify that any electronic version of this assessment item that I have submitted or will submit is identical to this paper version.				
	Turnitin ID: (if applicable)				
Insert this way	Signature: Date:				

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