


Course Title:	
Course Number:	
Semester/Year (e.g.F2016)	

Instructor:	
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<i>Assignment/Lab Number:</i>	
<i>Assignment/Lab Title:</i>	

<i>Submission Date:</i>	
<i>Due Date:</i>	

Student LAST Name	Student FIRST Name	Student Number	Section	Signature*
				

*By signing above you attest that you have contributed to this written lab report and confirm that all work you have contributed to this lab report is your own work. Any suspicion of copying or plagiarism in this work will result in an investigation of Academic Misconduct and may result in a "0" on the work, an "F" in the course, or possibly more severe penalties, as well as a Disciplinary Notice on your academic record under the Student Code of Academic Conduct, which can be found online at: <https://www.torontomu.ca/content/dam/senate/policies/pol60.pdf>