**2016 Materials Design and Technology practical (portfolio) examination**

**Declaration of authenticity**

*This form must be completed by candidates enrolled to sit the 2016 Materials Design and Technology ATAR course examination. Failure to submit a completed Declaration of authenticity could result in a referral to the Breach of Examination Rules committee.*

***Candidate declaration***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name: |  |  | School code: |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| SCSA student number:  |  |  |  |  |  |  |  |  |  |  | Context: |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

As a candidate for the 2016 Materials Design and Technology ATAR course practical (portfolio) examination, I declare that:

* I have completed all the work contained in this submission through the duration of the pair of ATAR course units being examined.
* None of the work contained in this submission was worked upon directly by a teacher or any other person or company except where it has been acknowledged in the portfolio.
* None of the work contained in this submission was submitted for external assessment in any other ATAR course or program.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please note:

1. To maintain anonymity this declaration form must accompany, but not be attached to, the submitted work.
2. Teachers must keep a copy of this form on official school records.

***Principal and teacher declarations***

*This section is to be signed by the school principal and the candidate’s teacher.*

I declare that, to the best of my knowledge the work contained in this submission:

* has been completed by the candidate through the duration of the pair of ATAR course units being examined
* has been developed mainly in school time, and any work away from school was regularly monitored
* has not been worked upon directly by a teacher or any other person or company, or any such work has been formally acknowledged
* has not been submitted for external assessment in any other ATAR course.

Teacher’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Non-school candidates***

An authorised witness needs to witness your signature and complete this section. See the following link: [www.courts.dotag.wa.gov.au/W/witnessing\_documents.aspx](http://www.courts.dotag.wa.gov.au/W/witnessing_documents.aspx) for a list of authorised witnesses.

***Authorised witness***

Name:

Address:

Signed: Date: