



## 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: 

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 Context: 

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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: \_\_\_\_\_