



Music ATAR course Practical (composition portfolio) examination 2016
Declaration of authenticity

This form must be completed by candidates enrolled to sit the Music ATAR course Practical (composition portfolio) examination 2016. 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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Category of the work: Composition portfolio Option 2 or Performance/Composition portfolio Option 3

As a candidate of the Music ATAR course Practical (composition portfolio) examination 2016, I declare that I have completed all the work through the duration of the units being examined for the composition portfolio submitted and that to the best of my knowledge all the information provided is correct, all third party material has been acknowledged on the *Composition portfolio submission form* and statements about my individual contribution are correct.

Signed: _____

Date: _____

Please note:

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

Principal and teacher declarations

This section is to be completed by the school principal and the candidate's teacher and/or supervisor.

As the teacher for the above candidate, I declare that, to the best of my knowledge the compositions contained in this composition portfolio submission:

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

Teacher's
signature: _____

Name: _____

Date: _____

Supervisor's
signature: _____

Name: _____

Date: _____

Principal's
Signature: _____

Name: _____

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 for a list of authorised witnesses.

Authorised witness

Name: _____

Address: _____

Signed: _____

Date: _____