



Assessment Notification – Common Cover Sheet
Higher School Certificate Assessment Task Cover Sheet

Name: _____ **Year:** _____ **Date:** _____

Subject: _____ **Teacher:** _____

Assessment Task Number (As per Assessment Policy booklet): _____

Assessment Task Title: _____

Assessment Weighting: % _____

Date Distributed: _____ **Date Due:** _____

All Higher School Certificate Assessment Tasks, other than In Class tasks, must be handed in on the due date.

Comments by Teacher: _____

Assessment Criteria/Marking Rubric: _____

Attach copy given to you when task was distributed.

Higher School Certificate Assessment Submission Receipt

Student's Name:

Assessment Task Title:

Date received to Student:

Student's Signature:

Teacher's Signature:

Subject Name:

Class Title:

This form is located: <https://cowra-h.schools.nsw.gov.au> then **Assessment Tasks** tab, **Year 12 Assessment Information**.