



Assessment Re-Submission

Programme	<input type="checkbox"/> DipHE Adult Nursing <input type="checkbox"/> DipHE Children's Nursing <input type="checkbox"/> DipHE Mental Health Nursing <input type="checkbox"/> PG Dip Adult Nursing <input type="checkbox"/> PG Dip Children's Nursing <input type="checkbox"/> PG Dip Mental Health Nursing	<input type="checkbox"/> BSc Adult Nursing <input type="checkbox"/> BSc Children's Nursing <input type="checkbox"/> BSc Mental Health Nursing <input type="checkbox"/> BSc Midwifery (3-year) <input type="checkbox"/> BSc Midwifery (78-week) Other
Module Code		
Module Title		
Curriculum Theme	<input type="checkbox"/> ABS <input type="checkbox"/> FACT <input type="checkbox"/> PNMK <input type="checkbox"/> Practice <input type="checkbox"/> PSPH <input type="checkbox"/> N/A	
Assessment Type		

Name of Module Leader		Student Number	
Student SURNAME		Student FIRST NAME	
Word Count		Cohort	
Rotation (if applicable)		Group Number	
Submission Deadline		Attempt (e.g. 1 st , 2 nd , 3 rd)	
Please tick ONE of the following options:	<input type="checkbox"/> This is the first time I have submitted this assessment	<input type="checkbox"/> This is a re-submission and I have included <u>all</u> the previous failed submission(s) and Marking Records in the back of this folder.	

I certify that the two copies of coursework, one being electronic, that I have submitted is my own unaided work, and that I have read and complied with the guidelines on plagiarism as set out in the student handbook. I understand that the University may make use of plagiarism detection software and that my work may therefore be stored on a database, which is accessible to other users of the same software. **Students should be aware that, where plagiarism is suspected, a formal investigation will be carried out, and action may be taken under the University's rules on Academic Misconduct. This might result in penalties ranging from mark deduction to withdrawal from the University.**

Signature Date

For office use only: Please stamp here

✂.....

Assessment Submission Receipt: Please complete the details below prior to submitting your work

Student Name:		
Module Code		For office use only: Please stamp here
Theme		
Assessment Type		