AS Physical Education (9396/02) Coursework Summary Assessment Form

| Centre Number | Centre Name |  |
| :--- | :--- | :--- |

## Complete in candidate number order

| Cand No. | Candidate Name | Activity One |  | Activity Two |  | Action Plan |  | Total (out of 90) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | *Act. Code | Mark (30) | *Act. Code | Mark (30) | *Act. <br> Code | Mark (30) |  |
|  |  |  |  |  |  |  |  | 0 |
|  |  |  |  |  |  |  |  | 0 |
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|  |  |  |  |  |  |  |  | 0 |

*Enter the relevant Activity Code from those listed (e.g. Ath, AF, Bad, etc.).
I confirm that all assessments have been carried out according to the AS Coursework Guidelines booklet and that assessments have been internally standardised to obtain a single, valid rank order of merit.

| Name of Teacher completing form |  |  |  |
| :--- | :--- | :--- | :--- |
| Signature of teacher |  | Date |  |

An independent person should sign to authenticate the times and distances achieved by candidates on individual activities.

| Name of the person authenticating <br> all times and distances achieved |  |  |  |
| :--- | :--- | :--- | :--- |
| Position of the independent <br> person at Centre |  |  |  |
| Signature of person |  | Date |  |

