CERTIFICATE OF AUTHENTICITY – Form COA

Que l'esprit gère le corps
Let the mind manage the body

SC 2025: Physical Education 5016 - Component 2 Authenticity of Coursework

School Code: MU_____ School Name: _____

Candidate/s Authentication of Originality				
SN	**Index No**	**Candidate Name (*Surname_Other Names*)**	**Signature**	**Remarks (*if any*)**
1	MU			
2	MU			
3	MU			
4	MU			
5	MU			
6	MU			
7	MU			
8	MU			
9	MU			
10	MU			
11	MU			
12	MU			
13	MU			
14	MU			
15	MU			

CERTIFICATION

We declare that, to the best of our knowledge, each work submitted is the unaided original work of each of the above candidate/s. Any other assistance or resources to which they have had recourse has been made known in that respect.

Name of Educator: _____

Signature: _____ **Date:** _____

Name of Principal/Rector: _____

Signature: _____ **Date:** _____