

External Assessment Flyleaf

Practical Cookery Assignment

X877/75/02

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Full name of centre			Town				
Forename(s)				Surname			
Date of bir	th						
Day	Month	Year	Scottish c	andidate number			

Candidate declaration

I confirm the following:

- I have read SQA's Your National Qualifications booklet and understand its contents.
- I understand that SQA may reduce or cancel my grades if I have not followed the rules set out in the *Your National Qualifications* booklet.
- The coursework submitted with this declaration is all my own work with all sources of information clearly identified and acknowledged.
- If I have used a resource sheet (also known as a research sheet or process information sheet),
 I have submitted it along with my coursework.
- I understand that this coursework will be submitted to SQA for marking.

Signature _____ Date ____

Please turn over to complete





For centre completion					
	In ticking this box it is confirmed that any potential child welfare concerns arising				
	from the content of the materials enclosed are being or have been addressed.				

For SQA Use Only

Practical Cookery National 5 Assignment

Skills, knowledge and understanding	Marks available	Marks awarded
1a Time plan	10 marks	
1b Equipment requisition	4 marks	
1c Service details	4 marks	
Total	18 marks	