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|  | **Level 2 Health and Social Care: Principles and Contexts****Unit 2: Health and social care to support outcome-focused provision for person- centred care****Non-exam assessment – Assignment 1 Mark Sheet** |

Name of Candidate: Candidate Number:

Name of Centre: Centre Number:

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| **Unit 2 Non-exam assessment – Assignment 1** |
| **Tasks** | **Max. Mark** | **Centre Mark** | **CENTRE COMMENTS** |
| **(a)** | **10** |  |  |
| **(b) (i)****(ii)** | **2****9** |  |
| **(c)** | **12** |  |
| **(d) (i)****(ii)** | **6****6** |  |
| **(e)** | **15** |  |
| **Total** | **60** |  |

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| **Assignment 1 Non-exam assessment: Comments** |
| **To be completed by the supervisor during the NEA.**Please indicate where help beyond normal supervisory guidance has been given and how this has affected the marks awarded. |
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**List the sources of information used in developing the NEA.**

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| **NOTICE TO CANDIDATES** |
| The work you submit for assessment must be your own.If you copy from someone else, allow another candidate to copy from you, or if you cheat in any other way, you may be disqualified from at least the qualification concerned. |

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| **DECLARATION BY TEACHER** | **DECLARATION BY CANDIDATE** |
| I confirm that the candidate's work was conducted under the conditions laid out by the specification. The candidate has clearly referenced any sources and any Artificial Intelligence tools used in the work. I understand that false declaration is a form of malpractice. I have authenticated the candidate's work and am satisfied that to the best of my knowledge the work produced is solely that of the candidate. Signed candidate declarations for the entire cohort will be kept on file. **Teacher’s signature**:**Date**: | I declare that my NEA assignment was completed independently. All work is my own, except for any non-original material clearly credited above. I have clearly referenced any sources and any Artificial Intelligence tools used in the work. I understand that false declaration is a form of malpractice.**Candidate’s signature:****Date**: |