



Assessment Cover Sheet

Module 1: Introduction to Small Business Management
Assessment 2: Internal Analysis

Tauira Details - Tauira to Complete

| | |
|--|---|
| 1 | Tauira Name: _____ |
| | Tauira ID Number: _____ |
| | Kaiako Name: _____ |
| | Date Submitted: __/__/__ Intake Start Date: __/__/__ Delivery Site: _____ |
| | I certify that this assessment is my own work. |
| Tauira Signature: _____ | |
| Delivery Mode (Please tick): <input type="checkbox"/> Mixed Mode <input type="checkbox"/> Contact Mode | |

Assessment Results - Kaiako to Complete

| | | | | | | |
|----------|-----------------------|--|-----------------------|--|-----------------------|--|
| 2 | Results (1st Attempt) | | Results (2nd Attempt) | | Results (3rd Attempt) | |
| | Achieve | | Achieve | | Achieve | |
| | Yet to Achieve | | Yet to Achieve | | Yet to Achieve | |
| | Date | | Date | | Date | |
| | Kaiako Comments: | | | | | |
| | | | | | | |

Declaration

| | | |
|----------|--|-----------------|
| 3 | Kaiako to complete: This section is to be completed once the tauira has ACHIEVED the learning outcomes for this Assessment. I confirm that this tauira has achieved the learning outcomes for this Assessment. Kaiako Signature: _____ Date: __/__/__ | Office Use Only |
| | Please note: Tauira enrolled in Mixed Mode Delivery are not required to complete this section, but they are to fill in their address details on the back page. Tauira to complete: This section is to be completed once the tauira has uplifted their ACHIEVED Assessment from their kaiako. Tauira Signature: _____ Date: __/__/__ | |

CERTIFICATE IN

SMALL BUSINESS MANAGEMENT (CSBM)

Te Tohu Paetahi Pakihi



Please fill in your name and correct
mailing address - Mixed Mode Taurira Only
