



Assessment Cover Sheet

Module 1: Business Development Analysis**Wāhanga Tuatahi:** Tātari Whakawhanake Umanga**Assessment 1:** Business Development Analysis**Whakamātautau Tuatahi:** Tātari Whakawhanake Umanga

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
	4 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: ____/____/____	

TE TOHU PAETAHI PAKIHI**CERTIFICATE IN APPLIED SMALL BUSINESS
GROWTH AND DEVELOPMENT (CABG)**