

# ABST

## Aboriginal Studies Assignment Cover Sheet



Woolyungah Indigenous Centre  
University of Wollongong

STUDENT NAME		STUDENT NUMBER
TUTOR NAME		TUTORIAL GROUP (day/time)
SUBJECT NUMBER	SUBJECT NAME	
ASSIGNMENT NAME		
DATE DUE	DATE SUBMITTED	CONTACT PHONE NUMBER
I certify that this essay is entirely my own work, except where I have given fully documented references to the work of others, and that the material contained in this essay has not previously been submitted or assessed in any formal course of study.		SIGNATURE

SIGHTED BY (Tutor or Staff Member's signature) / DATE	WOOLYUNGAH DATE STAMP
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Optional receipt for written work – Aboriginal Studies  Student Name: .....  Student Number: .....  Assignment Title: .....	STAFF SIGNATURE/DATE or WICs DATE STAMP
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