

EXAMINATION AND INVIGILATION RECORD

Examination (Mod Name & No.)														
Course							Number of Students							
Date				Time				Venue				Academic Staff		
Examination pack received				Examination pack returned										
Senior Invigilator (<i>Signature</i>)		Date		No of Scripts	Date	Signature			Signature of Office Staff					
Time of Commencement			Time of Completion						Academic staff present during 1st 15 minutes					
									Name:					
									Contact No. for duration of exam:					
									NB: full University number should be given e.g. 262169					
Special Circumstances														
<i>Please note any unusual circumstances that occurred during the examination, which affected all students. For example, error in the examination paper, fire alarm etc. Factors pertinent to individual students should be noted on the Examination Attendance Sheet. Instances of suspected Academic Misconduct should be reported to the School after the exam and the relevant form should be completed (available from the School Office).</i>														

Markers	Taken	Returned	Markers	Taken	Returned
1			3		
2			4		