

The University of Sydney – Faculty of Health Sciences  
**School of Health Information Management**

## Attestation Form

*For postal or in-person submission*

**Surname:** (print) \_\_\_\_\_

**Given names:** \_\_\_\_\_

**Student ID:** \_\_\_\_\_

**Address:** (include previous address, if changed) \_\_\_\_\_

\_\_\_\_\_

**Unit of Study:** \_\_\_\_\_

**Lecturer:** \_\_\_\_\_

**Assignment Number/Topic:** \_\_\_\_\_

\_\_\_\_\_

**Date Due:** \_\_\_\_\_

**Date Submitted:** \_\_\_\_\_

**Email Address** for acknowledgement of receipt:

\_\_\_\_\_

I hereby certify that no part of this assignment constitutes a breach of the University's Student Plagiarism: Course Work policy. This means I am certifying that this assignment is my own work, based on my personal study and/or research, and that the work of others is referenced appropriately through acknowledgement of the source. I also certify that the assignment has not previously been submitted for assessment and that I have not copied in part or whole or otherwise plagiarised the work of other students.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contact telephone number