Attach this cover sheet to your assignment and submit to the CSE Student Office (K17-Ground, 9:30am-4:30pm). This form requires a staff member from the Student Office to sign and stamp this cover sheet. You will be provided with a receipt for your records.

Section 1.1 Details

Student Number

First

FAMILY

Student Number

First

FAMILY

Student Number

First

FAMILY

Tutorial Details
e.g. MON 16 EVEN

Day

Time

Even or Odd

We declare that this assignment is our own original work. Indicate percentage input if not equal.

Signatures

Section 3.1 – Assessment - Tutor use only

Comments:

Consolidated Design
Rationale
Walkthrough Plan
Walkthrough Summary
Total

OFFICE USE ONLY

RECEIVED BY: ____________________________
SIGNATURE: ____________________________
(CSE stamp here with date of receipt)

SECTION 2 – Student Receipt

HCI 2004 – ASSIGNMENT 3.1 - MUSEUM INTERACTIVE

Student Numbers

Please retain this receipt until after your final results for this session have been confirmed.

OFFICE USE ONLY

RECEIVED BY: ____________________________
SIGNATURE: ____________________________
(CSE stamp here with date of receipt)