	FOR OFFICIAL USE				
1	National				
	Qualification 2024	15		Mar	k

External Assessment Flyleaf

Practical Cookery Assignment

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Signature _

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Fill in these boxes and sign the candidate dec	aration below.	
Full name of centre	Town	
Forename(s)	Surname	
Date of birth		
Day Month Year	cottish candidate number	
Candidate declaration		
I confirm that:		
• I have read SQA's Your National Qualification	s booklet and understand its contents.	
I understand that SQA may reduce or cance specified in the Your National Qualification	my grades where I have not followed the	rules
 the coursework submitted with this declaration clearly identified and acknowle 	· · · · · · · · · · · · · · · · · · ·	F
 I understand that this coursework will be so 	bmitted to SOA for marking.	

Please turn over to complete



_____ Date _



In ticking this box it is confirmed that any potential child welfare concern from the content of the materials enclosed are being or have been addre	_

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Practical Cookery National 5 Assignment

Skills, knowledge and understanding	Marks available	Marks awarded
1a Time plan	10 marks	
1b Equipment requisition	4 marks	
1c Service details	4 marks	
Total	18 marks	