



## Internal assessment: group 3

Submit to: <b>Moderator</b>												Arr	iv	al d	late	: 20 Apr / 20 Oct	Session:
School number: 0 0																	
Sc	hool	l na	me:				•••••						•••				
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Su	Subject:												Level(s):				
Co	py t	he d	leta	ils	fron	n 3/	CS.	fori	ms.			ubn me d				ternal assessment marks	entered on IBIS.
(	Candidate session number															Candidate name	Total
1 2 2 3 3 4 4 5 5		0 0 0 0														levels is 1 to 20 candida	
		ates														icluded.	mes, the sample size is o
7	0	0	<u> </u>				<u> </u>			] ]	_						
3	0	0	<u> </u>				<u> </u>			]							
																evels is 41 or more cand pove, another 2 candidate.	-
	0	0															
0	0	0															

## **International Baccalaureate**

## 3/IA (reverse)

School name:	•••••	
If group work has been undertaken please i proportion of group and individual work.	ndicate the nature and	d extent of teacher direction and the
I/We confirm that, to the best of my/our kn each candidate.	owledge, each sample	e submitted is the authentic work of
Teacher's name:	Signature:	Date:
Teacher's name:	Signature:	Date:
Teacher's name:	Signature:	Date: