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|  | **WJEC LEVEL 3 IN**  **FOOD SCIENCE AND NUTRITION**  **EXTERNAL ASSESSMENT TIMESHEET**  **Unit 2: ENSURING FOOD IS SAFE TO EAT** |

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| **Centre Name:** |  |

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| **Centre Number:** |  |  |  |  |  |

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| **Candidate Name:** |  |

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| **Candidate Number:** |  |  |  |  |  |
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**The total time allowed must not exceed 8 hours**

**The timed, supervised hours took place as follows:**

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| **Tasks** |  | **Dates** | | |  | **Time Allowed [*8 hours*]** | |
|  |  | **Hour** | **Minutes** |
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| **Total** |  |  |

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| I certify that all candidates entered were informed of the above date  **Supervisor’s Signature:…………………………………………….. Date*:* …………………..................** |

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| I confirm that the evidence submitted for assessment has been produced by me without any assistance beyond that allowed/  **Candidate’s Signature*:* ……………………………………………… Date*:* …………….........................** |