

Please write clearly in block capitals.							
Centre number:							
Centre name:	UNIVERSITY OF WALES: TRINITY SAINT DAVIDS						
Learner number (1st 7 digits of CIPD Membership number):	8	8	0	0	1	1	9
Learner surname:	PRICE						
Learner other names:	NEL						
Unit code:	5HR01						
Unit title:	Employment relationship management						
Assessment ID:	CIPD_5HR01_22_01						
Assessment start date:	19/06/23						
Assessment submission date:	31/07/23						
First resubmission date for centre marking – if applicable							
Second resubmission date for centre marking – if applicable							
Declared word count	~~4271~~ 4271						
Assessor name:	Rebecca Francis						
Assessor signature:							
IQA name (if applicable):							
IQA signature (if applicable):							

Declaration of Authentication

Declaration by learner

I can confirm that this assessment is all my own work and where I have used materials from other sources, they have been properly acknowledged.

Learner name: **NEL PRICE**

Learner signature: 

Date* **31/07/23**

*This should be the date on which you submit your assessment

Declaration by Assessor

I confirm that I am satisfied that to the best of my knowledge, the work produced is solely that of the learner.

Assessor name:

Assessor signature:

Date: