Form: Declaration of Collaborative Work

(First Name)	(Last Name)	(EMPLID: Last 4 Digits)
(1	Name/Number of Assign	nment)
Select only one of the followin	g:	
O I did not collaborate with mentioned above.	any student in my CISC 332	25 section on the assignment
I collaborated on the assignment of the sign of the state of the sign of the s	gnment mentioned above wit	th the students whose names are
2 0	nment below. Make sure the	name of every student with whom y mention you on their forms as
<u> </u>	say so here or fail to	ment's grade. However, if you mention the names of your re of 0.
My Collaborators (U	Jp to 3 students can wor	rk in the same group!)
1. First Name:	Last Na	me:
2. First Name:	Last Na	me:
I, true. I am aware that pro the mentioned assignment	, pledge that all the oviding false information getting a score of 0.	information on this form is on this form could result in
Signature:		Date: / /