



DUBLIN CITY UNIVERSITY POSTGRADUATE STUDIES

Examination Report for the Award of a Higher Degree (by Research)

SECTION A

Name of Candidate: _____

Student No: _____

Title of Award Sought: _____

Title of Thesis: _____

Name of External Examiner(s): _____

Name of Internal Examiner(s): _____

Name of Supervisor: _____

SECTION B1 *The External Examiner(s) should complete Section B1, or attach his/her report to this form.*

The report should incorporate a commentary on the work presented for examination as well as detailing any corrections to be made.

The External Examiner(s) and Internal Examiner are welcome to meet in advance of or after a viva voce examination, without a candidate's academic supervisor or the Independent Chairman of the examination being present.

Report on Examination of Thesis

Signed: _____ *External Examiner(s)*

Date: _____

SECTION B2 *This section should be completed by the Internal Examiner(s).*

The report should incorporate a commentary on the work presented for examination as well as detailing any corrections to be made.

The External Examiner(s) and Internal Examiner are welcome to meet in advance of or after a viva voce examination, without a candidate's academic supervisor or the Independent Chairman of the examination being present.

Report on Examination of Thesis

Signed: _____ *Internal Examiner(s)*

Date: _____

SECTION B3 *Sections B3 and C should be completed jointly by examiners, if in agreement, or individually, if in disagreement.*

Report on Oral Examination of Candidate

SECTION C

Recommendation

The Examiners are asked to indicate the final outcome of the Examination by placing a tick (√) in the relevant box.

In the cases where the Examiners disagree on the outcome, separate PGR6 forms must be completed by Each Examiner.

- | | |
|---|-----|
| 1. Award recommended: no correction needed. | [] |
| 2. Award recommended: subject to inclusion of corrections and revisions specified in Section D overleaf. | [] |
| AND | |
| 2.1 Please indicate if the corrections required are of a typographical nature and require minor changes only. | [] |
| 2.2 Please indicate if corrections can be validated by: | |
| (a) the supervisor without recourse to the examiners | [] |
| (b) the internal examiner only | [] |
| (c) by both the internal and external examiners | [] |
| 2.3 Please indicate if corrections can be validated: | |
| (a) without further oral examination; | [] |
| (b) with further oral examination. | [] |
| 3. Award NOT recommended but resubmission of a revised thesis to be permitted subject to the conditions specified in Section D of this form. | [] |
| 4. Recommendation to permit candidates to withdraw thesis submitted for Master's degree, for revision and resubmission at a later date for the higher award of PhD. | [] |
| 5. Rejected but with a recommendation that the candidate offers the thesis for the lower award of | [] |
| 6. Rejected with no recommendation. | [] |

Signed: _____ *External Examiner(s)*

Date: _____

Signed: _____ *Internal Examiner(s)*

Date: _____

Further Comments:

Examiners are asked to indicate below the grounds for their recommendation, if the outcome is not clear-cut or favourable. This space may be used also to comment on the examination process as a whole.

Signed: _____ *External Examiner(s)*

Date: _____

Signed: _____ *Internal Examiner(s)*

Date: _____

SECTION D**Details of Corrections:**

Examiners are asked to provide below precise details of any corrections, revisions, conditions attaching to a resubmission. Please use a separate sheet, if necessary and attach to this form.

DECLARATION

I/We hereby certify that the corrections and/or revisions specified above have been carried out in accordance with the Examiners' recommendations.

Signed: _____ **Please print name**

*Internal Examiner(s) and/or External
Examiner(s) or Internal Supervisor
(delete as appropriate)*

Date: _____

N.B *Each Examiner is asked to submit the Examination Report Form to Student Awards, Registry as soon as possible after completion of the Examination process.*

SECTION E: REPORT OF INDEPENDENT CHAIRPERSON

The role of the Independent Chairperson is to ensure adherence to the oral examination regulations and procedures and to ensure that the oral examination is conducted in a reasonable and equitable manner.

The assessment of the candidate remains the sole responsibility of the Examiners appointed by Academic Council. The Independent Chairperson does not have any input into nor participation in any way in the assessment of the candidate.

Independent Chairpersons are asked to state that the oral examination was conducted according to the University's regulations.

Date of Oral Examination: _____

Name of Candidate: _____

Student No. _____ **Title of Award Sought** _____

The oral examination was carried out in accordance with the University's Regulations.

Yes []

No []

If not, details of the reasons should be given below:

Signature: _____ **Independent Chairperson**
Name (*please print*)