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

The following instructions should be reviewed prior to completion and submission of report.

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| Please refer to [Guidance on Electronic Completion & Submission of PGR Forms](https://www.dcu.ie/registry/postgraduate-research-academic-regulations-guidelines-registry). Completed forms must be submitted to Student Awards, Registryat [postgraduate.research@dcu.ie](mailto:postgraduate.research@dcu.ie) |
| **SECTION A - *Summary of Details*** |
| * Complete as requested |
| **SECTION B.1 & B.2 – *Preliminary Reports on the Thesis*** |
| * To be completed, signed and dated by the Examiners prior to the *viva voce* and sent to the Independent Chairperson. * In the case where no *viva voce* is due to take place (therefore no Independent Chairperson), the Internal Examiner is responsible for sending the completed reports to the Registry and informing the student of the recommendation. * Please ensure any attachments are also each **signed and dated**. |
| **SECTION B.3 - *Report Following the Viva Voce*** |
| * Where there is a *viva voce*, Section B3 should be completed on the day. * Where there is no *viva voce,* this section is not applicable and is not required to be completed. |
| **SECTION C - *Recommendations By Examiners*** |
| * Where there is a *viva voce*, Section C should be completed on the day of the *viva voce*. * Where there is no *viva voce,* this section should be completed by the Internal Examiner in consultation with the External Examiner. As above, the Internal Examiner is responsible for sending the completed reports to the Registry and informing the student of the recommendation. |
| **SECTION D.1 *- Details of Corrections***  **SECTION D.2 - *Examiner(s) Declaration***  **SECTION E.1 *- Report of the Independent Chairperson*** |
| * The Independent Chairperson should ensure that, where relevant, the corrected/revised thesis is sent to the appropriate examiner for review and final sign-off. * The Independent Chairperson should send the completed PGR6 form (Section A through to Section E1) to Registry immediately following the viva voce examination. If corrections are required, all sections excluding D.2 should be returned to Registry immediately following the viva voce examination: Section D.2 should be submitted to Registry subsequently when complete. * It is important that the PGR6 is returned, even in cases where an award has not been recommended at this time. * Where there is no *viva voce*, the Internal Examiner should send the completed PGR6 form (Section A through to Section D.2) to Registry immediately after completion of the examination process. If corrections are required, Sections A to D.1 should be returned to Registry immediately following the examination: Section D.2 should be submitted to Registry subsequently when complete. * The PGR6 reports are then held in Registry until the next scheduled Faculty Awards Board for Research Degrees meeting. |
| **SECTION E.2 - *Report of the Independent Chairperson to Head of School*** |
| * This should be detached and sent by the Independent Chairperson to the Head of School. |

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

This form should be returned to Student Awards, Registry to [postgraduate.research@dcu.ie](mailto:postgraduate.research@dcu.ie), by the Independent Chairperson (in the case of a PhD or Professional Doctorate) or by the Internal Examiner (in the case of a Master’s) **immediately following the Viva Voce examination.**

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| --- | --- | --- | --- |
| **Name of Candidate** |  | | |
| **Student ID Number** |  | | |
| **Title of Award Sought**  (please tick as appropriate) | DBA **❒**  DProfElite **❒** DPsych **❒** EdD **❒** PhD **❒**  MA **❒** MEng **❒**  MSc **❒**  LLM **❒** MPhil **❒** MBS **❒**  MEd **❒** | | |
| **Title of Thesis** |  | | |
| **School** |  | | |
| **Internal Examiner** |  | | |
| **External Examiner(s)** |  | | |
| **Independent Chairperson(s)** |  | | |
| **Supervisor(s)** | **Principal/**  **Joint Principals** | **Secondary Internal (where relevant)** | **Secondary External (where relevant)** |
|  |  |  |

1. **SUMMARY OF DETAILS**

**B.1.: EXTERNAL EXAMINER - PRELIMINARY REPORT ON THE THESIS**

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| **Name of Candidate:** | | | |
| **Student ID Number:** |  | **Title of Award Sought:** |  |

**Notes regarding submission of the preliminary report and the *viva voce* examination:**

* In the cases where a *viva voce* is being held, please send this report to the Independent Chairperson prior to the *viva voce* examination.
* External and Internal Examiners may meet in advance of a viva voce examination, if any of the examiners desire, without a candidate’s academic supervisor and/or the Independent Chairperson being present.
* In the case where no *viva voce* is due to take place, Section B1 should be sent to the Internal Examiner.

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| **External Examiner - Preliminary Report of the Examination of the Thesis**   * The External Examiner(s) should populate their preliminary report below. This report should incorporate a commentary on the work presented for examination as well as detailing any corrections to be made. * **Please ensure any attachments are also signed and dated.** |
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| **External Examiner Signature**  Please ensure any attachments are also **signed and dated**. |
| Sign: \_\_ \_\_\_\_ Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date**:**  \_\_\_\_\_\_\_\_\_\_  **External Examiner** |

**B.2.: INTERNAL EXAMINER - PRELIMINARY REPORT ON THE THESIS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Candidate:** | | | |
| **Student ID Number:** |  | **Title of Award Sought:** |  |

**Notes regarding submission of the preliminary report and the *viva voce* examination:**

* In the cases where a *viva voce* is being held, please send this report to the Independent Chairperson prior to the *viva voce* examination.
* External and Internal Examiners may meet in advance of a *viva voce*, if any of the examiners desire, without a candidate’s academic supervisor and/or the Independent Chairperson being present.
* In the case where no *viva voce* is due to take place, the Internal Examiner is responsible for sending the completed reports to the Registry and informing the student of the recommendation.

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| **Internal Examiner - Preliminary Report of the Examination of the Thesis**   * The Internal Examiner should populate their preliminary report below. This report should incorporate a commentary on the work presented for examination as well as detailing any corrections to be made. * **Please ensure any attachments are also signed and dated.** |
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| **Internal Examiner Signature**  Please ensure any attachments are also **signed and dated**. |
| Sign: \_\_ \_\_\_\_ Print: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date**:**  \_\_\_\_\_\_\_\_\_\_  **Internal Examiner** |

**B.3.: REPORT FOLLOWING THE VIVA VOCE**

*Sections B3 and C should be completed on the day of the viva voce and should focus on performance during the Viva Voce.*

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| **Name of Candidate:** | | | |
| **Student ID Number:** |  | **Title of Award Sought:** |  |

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| **Report following the Viva Voce**   * To be completed jointly by examiners, if in agreement, or individually, if in disagreement. * **Please ensure any attachments are also signed and dated.** |
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| **Internal & External Examiner(s) Signature**  Please ensure any attachments are also **signed and dated**. |
| Sign: \_\_ \_\_\_\_ Print: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Date**:**  \_\_\_\_\_\_\_\_\_\_  **Internal Examiner**  Sign: \_\_ \_\_\_\_ Print: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Date**:**  \_\_\_\_\_\_\_\_\_\_  **External Examiner**  Note: Insert additional signature line if there are two External Examiners. |

**C: RECOMMENDATIONS BY EXAMINERS**

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| **Name of Candidate:** | | | |
| **Student ID Number:** |  | **Title of Award Sought:** |  |

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| * The Examiners are asked to indicate the final outcome of the Examination by placing a tick (✓) in the box corresponding to the relevant recommendation. * In the cases where the Examiners disagree on the outcome, separate PGR6 forms must be completed by each Examiner. * Please ensure any attachments are also **signed and dated**. | | |
| **1.** | Award recommended: no correction needed. | **❒** |
| **2.** | Award conditionally recommended: subject to inclusion of corrections and revisions as specified in Section D  ***(please also complete sections 2.1 & 2.2)*** | **❒** |
| ***2.1*** *Please indicate if the corrections required are:* | |
| * 1. clearly specified textual emendations *and/or* | **❒** |
| * 1. clearly specified revisions to content | **❒** |
| ***2.2*** *Please indicate if corrections should be validated by:* | |
| * 1. the internal examiner only | **❒** |
| * 1. the external examiner only | **❒** |
| * 1. by both the internal and external examiners | **❒** |
| **3.** | Award **NOT** recommended but resubmission and full re-examination of a revised thesis to be permitted (normally within one year from the date when the student is informed of the recommendation (ref Section 11.4.7 of the Academic Regulations)). | **❒** |
| **4.** | Recommendation to permit candidate to withdraw thesis submitted for Master’s degree, for revision and resubmission at a later date for the higher award of PhD. | **❒** |
| **5.** | Where a doctoral award is sought, award of Master’s Degree is recommended subject to re-formatting as a master’s thesis and inclusion of corrections and revisions as specified in Section D.  (***Section 2.2 must also be completed*** *to indicate the arrangements for validation of corrections*). | **❒** |
| ***5.1*** *Please indicate the recommended award title:* | |
| **LLM ❒ MA ❒ MBS ❒ MEng ❒ MEd ❒ MPhil ❒ MSc❒** | |
| **6.** | No Degree be awarded as candidate is unlikely to reach the standard for a research award. | **❒** |

*To be completed on the day of the viva voce in cases where one is being held.*

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| **Internal & External Examiner(s) Signature**  Please ensure any attachments are also **signed and dated**. |
| Sign: \_\_ \_\_\_\_ Print: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Date**:**  \_\_\_\_\_\_\_\_\_  **External Examiner**  Sign:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Print: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Date**:**  \_\_\_\_\_\_\_\_\_\_ **Internal Examiner**  Note: Insert additional signature line if there are two External Examiners. |

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| **Name of Candidate:** | | | |
| **Student ID Number:** |  | **Title of Award Sought:** |  |

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| **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. |
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| **Internal & External Examiner(s) Signature**  Please ensure any attachments are also **signed and dated**. |
| Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: **\_\_\_\_\_\_\_\_\_\_**  **Internal Examiner**  Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_  **External Examiner**  Note: Insert additional signature line if there are two External Examiners. |

**D.1: DETAILS OF CORRECTIONS**

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| **Name of Candidate:** | | | |
| **Student ID Number:** |  | **Title of Award Sought:** |  |

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| **Details of Corrections**   * Examiners are asked to provide precise details of any corrections and/or revisions, including an indicative timeframe for these changes *(Ref:  11.4.5).* * Furthermore, if the recommendation is a resubmission, please provide any conditions attached. * Please use a separate sheet, if necessary and attach to this form. |
|  |

**D.2: EXAMINER(S) DECLARATION – COMPLETION OF CORRECTIONS**

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| **Name of Candidate:** | | | |
| **Student ID Number:** |  | **Title of Award Sought:** |  |

Complete ***either*** Section D.2 (i) ***OR*** Section D.2 (ii)

***D.2 (i) Corrections Satisfactory***

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| EXAMINER’S DECLARATION(NOTE: The declaration below should only be signed by the relevant Examiner(s) indicated in Section C, AFTER the Candidate’s corrections have been validated). |
| I/We hereby certify that the corrections and/or revisions specified above have been carried out in accordance with the Examiners’ recommendations.  Sign: \_\_ \_\_\_\_ Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date**:**  \_\_\_\_\_\_\_\_\_\_  **Internal Examiner**  Sign: \_\_ \_\_\_\_ Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date**:**  \_\_\_\_\_\_\_\_\_\_  **External Examiner**  Note: Insert additional signature line if required. |

**OR**

***D.2 (ii) Corrections Unsatisfactory – New Recommendation***

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| EXAMINER’S DECLARATION(NOTE: The declaration below should only be completed where revisions are considered to be unsatisfactory and, in accordance with Section 11.4.6 of the *Academic Regulations for Postgraduate Degrees by Research and Thesis,* the examiners deem that a new recommendation is necessary.) |
| We hereby certify that the corrections and/or revisions specified above have ***not*** been carried out in accordance with the Examiners’ recommendations and our revised recommendation is as follows: |

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| **1.** | Award **NOT** recommended but resubmission and full re-examination of a revised thesis to be permitted (normally within one year from the date when the student is informed of the recommendation (ref Section 11.4.7 of the Academic Regulations)). | **❒** |
| **2.** | Where a doctoral award is sought, award of Master’s Degree is recommended subject to re-formatting as a master’s thesis and inclusion of corrections and revisions as specified in Section D | **❒** |
| **3.** | No Degree be awarded as candidate is unlikely to reach the standard for a research award. | **❒** |

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| **Further Comments:**  Examiners are asked to indicate below the grounds for their revised recommendation. Please ensure any attachments are also **signed and dated**. |
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| **Internal & External Examiner(s) Signature**  Please ensure any attachments are also **signed and dated**. |
| Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date**:** \_\_\_\_\_\_\_\_  **Internal Examiner**  Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_  **External Examiner**  Note: Insert additional signature line if there are two External Examiners. |

**E.1.: REPORT OF THE INDEPENDENT CHAIRPERSON**

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| **Name of Candidate:** | | | |
| **Student ID Number:** |  | **Title of Award Sought:** |  |

* The role of the Independent Chairperson is to ensure adherence to the examination regulations and procedures as per section 11.5 of the Academic Regulations for Postgraduate Degrees by Research and Thesis 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.

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| --- | --- | --- |
| **Date of Oral Examination:** |  | |
| **The oral examination was carried out in accordance with the University’s Regulations:** | **Yes ❒** | **No ❒** |
| **Please populate comments below:** | | |
|  | | |

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| Independent Chairperson Signature |
| Sign: \_\_ \_\_\_\_\_\_ Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date**:**\_\_\_\_\_\_\_\_\_\_  **Independent Chairperson** |

**E.2.: REPORT OF THE INDEPENDENT CHAIRPERSON TO HEAD OF SCHOOL**

(Please **detach Section E2** and forward to the Head of School)

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| **Name of Candidate:** | | | |
| **Student ID Number:** |  | **Title of Award Sought:** |  |

* The Chair should make a formal report to the Head of School on the quality of the examination process and on the recommendations made by the examiners. This ensures that the School will get appropriate feedback that can be used to good effect in improving the overall quality of future activities.

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| --- | --- |
| **Date of Oral Examination:** |  |
| **Chairperson’s report on quality of the examination process:** | |
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| Independent Chairperson Signature |
| Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_  **Independent Chairperson** |

**Data Protection Notice**

Personal information that you submit to Registry in connection with any service provision will be treated in accordance with the Registry Data Protection Notice, which can be viewed at the following website address: <https://www.dcu.ie/registry/data-protection-notice.shtml>