

Nomination of Examiners

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Faculty |  | | | |
| Department |  | | | |
| **Qualification for which student is registered** | |  | | |
| **Offering type** | **Full time registration** |  | **Part time registration** |  |
| **Prior qualification** | |  | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Student Surname |  | | | **Student No.** | | |  | |
| First Names |  | | | Title (Mr, Ms) | | |  | |
| **Postal Address** |  | | | | | | | |
| **Tel (W)** | **Tel (H)** | Cell | **Fax** | | e-Mail | | | |
|  |  |  |  | |  | | | |
| **Title of Dissertation/ Thesis** |  | | | | | **Full** | |  |
| **Partial** | |  |
| **Dissertation/Thesis** | | |

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| --- | --- | --- | --- | --- | --- | --- |
| Supervisor |  | | | | | |
| Position |  | | | **Present Qualifications** | |  |
| **Tel (W)** | **Tel (H)** | Cell | | | **Fax** | e-Mail |
|  |  |  | | |  |  |
| Co-Supervisor |  | | | | | |
| Position |  | | | **Present Qualifications** | |  |
| **Tel (W)** | **Tel (H)** | | Cell | | **Fax** | e-Mail |
|  |  | |  | |  |  |

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| --- | --- | --- | --- | --- |
| Examiner 1 **Full Name** |  | | Title |  |
| Position |  | | Qualifications |  |
| Postal Address |  | | | |
| **Tel (W)** | **Tel (H)** | Cell | **Fax** | e-Mail |
|  |  |  |  |  |
| Area of Expertise |  | | | |
| Institution |  | | | |
| Supervision experience |  | | | |
| Examination experience |  | | | |
| Recent publications (maximum 6)\* |  | | | |

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| Examiner 2 **Full Name** |  | | Title |  |
| Position |  | | Qualifications |  |
| Postal Address |  | | | |
| **Tel (W)** | **Tel (H)** | Cell | **Fax** | e-Mail |
|  |  |  |  |  |
| Area of Expertise |  | | | |
| Institution |  | | | |
| Supervision experience |  | | | |
| Examination experience |  | | | |
| Recent publications (maximum 6)\* |  | | | |

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| --- | --- | --- | --- | --- |
| Examiner 3 **Full Name** |  | | Title |  |
| Position |  | | Qualifications |  |
| Postal Address |  | | | |
| **Tel (W)** | **Tel (H)** | Cell | **Fax** | e-Mail |
|  |  |  |  |  |
| Area of Expertise |  | | | |
| Institution |  | | | |
| Supervision experience |  | | | |
| Examination experience |  | | | |
| Recent publications (maximum 6)\* |  | | | |

***PLEASE NOTE THAT NOMINATION OF AN ADDITIONAL EXAMINER (FOR RESERVE PURPOSES) IS RECOMMENDED BUT IS OPTIONAL ONLY.***

This means that three (3) examiners may be proposed for a masters dissertation and four (4) for a doctoral thesis.

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| Examiner 4 **Full Name** |  | | Title |  |
| Position |  | | Qualifications |  |
| Postal Address |  | | | |
| **Tel (W)** | **Tel (H)** | Cell | **Fax** | e-Mail |
|  |  |  |  |  |
| Area of Expertise |  | | | |
| Institution |  | | | |
| Supervision experience |  | | | |
| Examination experience |  | | | |
| Recent publications (maximum 6)\* |  | | | |

\* An abridged CV (1 page max.) of the proposed examiners must be attached.

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(HoD)

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Chairperson of Faculty Research Committee)

|  |  |
| --- | --- |
| **Faculty approval**: Date of Minutes in which approval of examiners was recorded |  |

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| **Routing** | **Supervisor** |  | **HoD** |  | **FRC** |  | **HDC** |  |
|  | | | | | | | For ratification | |

***PLEASE NOTE THAT EXAMINATION COPIES OF THESES/DISSERTATIONS MAY BE SUBMITTED TO EXAMINERS AFTER FRC APPROVAL AND NEED NOT WAIT UNTIL AFTER HDC RATIFICATION. [[1]](#footnote-1)***

1. “Ratification” is a type of retrospective approval, and is part of the HDC’s oversight function. [↑](#footnote-ref-1)