**University of St Andrews**

**Proposal for the Appointment of External Examiner**

**Extension for Fifth and Final Year**

Schools are responsible for ensuring that nominations for External Examiners are consistent with the University’s Policy on External Examining <https://www.st-andrews.ac.uk/policy/academic-policies-quality-and-standards-external-examiners/external-examining.pdf>

Please complete the following details and email the form to

[external@st-andrews.ac.uk](mailto:external@st-andrews.ac.uk)

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| --- | --- | --- | --- |
| **SCHOOL** |  | | |
| **DEPARTMENT** |  | **Date** |  |

|  |  |
| --- | --- |
| **1** **DETAILS OF EXAMINER** | |
| **Full Name** |  |

|  |  |
| --- | --- |
| **2** **DETAILS OF COURSE/SUBJECT AREA** | |
| **Course Title/Subject Area** *(State the* ***modules*** *and/or programmes to which the Examiner has responsibility)* | |
|  | |
| **Level\*** | Undergraduate Postgraduate Undergraduate & Postgraduate |

\* delete as appropriate

|  |  |
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| **3** **DETAIL OF HOME INSTITUTION** | |
| **Name of Institution** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **4** **EXTENSION OF CURRENT APPOINTMENT FOR A FIFTH AND FINAL YEAR** | | | |
| From |  | To |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **5** **PROPOSED FEE LEVEL** | | | |
| *(For PGT examiners, please state if you wish to pay a flat fee (state amount) or use the standard formula – currently £30 per student, £10 per dissertation)* | | | |
| UG | £ | PGT | Flat Fee £ Formula*\** |

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| Submitted by |  | | *Head of School/on behalf of HoS\** |
| Position *(if not Head of School)* | |  | |

\* delete as appropriate