

External Examiner Nomination Form

| Student Information: | | | | |
|----------------------|------------|------------------------|----------------|--|
| Last or Family Name | First Name | | Middle Initial | |
| | | | | |
| Degree | Program | U of R Student number: | | |
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- If the nominee is not an accredited member of faculty, attach their electronic CV
- The supervisor will verify that the nominee is willing and available to serve.
- The External Examiner for Ph.D. theses must be from outside the University of Regina, and External Examiners for master's theses are to be from outside the student's department/program.
- External Examiner Conflict of Interest Checklist Completed and attached
- The External Examiner is expected to participate in the thesis defense in person or by video-conference. Under special circumstances, and for PhD theses only, the External may provide a detailed report and questions to be administered by the defense Chair.

| Nominee for External Examiner: | | |
|--------------------------------|--|--|
| Name & Title: | | |
| Department | | |
| University | | |
| Email | | |
| Rationale for Choice: | | |
| | | |

| Approvals | | | |
|---------------------------------------|----------------------------------|-------|--|
| Supervisor's Name: | Supervisor's Signature: | Date: | |
| | | | |
| Co-supervisor's Name (if applicable): | Co-supervisor's Signature: | Date: | |
| | | | |
| Department Head's Name*: | Department Head's Signature: | Date: | |
| | | | |
| FGSR Associate Dean's Name: | FGSR Associate Dean's Signature: | Date: | |
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* If the Department Head or Dean is a member of the student's committee, a designate must approve this form.