**NOMINATION OF NEW EXTERNAL EXAMINERS**

**Full name of the Sub-Board for which the new examiner will be acting:**

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**Academic year when appointment will commence:**

(N.B. postgraduate examining for 19/20 awards taking place in autumn 2020 would count as 19/20 appointment)

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**Details of Previous Examiner for the Sub-Board:**

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| Full Name |  |
| Home institution: |  |
| Years acted: |  |

**Details of New Examiner for the Sub-Board:**

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| --- | --- |
| Title (Dr/Prof etc.): |  |
| Full Name: |  |
| Home Institution: |  |
| Position: |  |
| Email Address: |  |

**Please confirm the Examiner’s Ability to Act by checking the boxes below:**

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| --- | --- |
|  | I confirm that, to the best of my knowledge, the examiner is not a member of a governing body or committee of Birkbeck College or one of its collaborative partners, or a current employee of Birkbeck College or one of its collaborative partners. |
|  | I confirm that, to the best of my knowledge, the examiner does not have a close professional, contractual or personal relationship with a member of staff or student involved with the programme of study. |
|  | I confirm that, to the best of my knowledge, the examiner will not be required to assess colleagues who are recruited as students to the programme of study. |
|  | I confirm that, to the best of my knowledge, the examiner will not be in a position to influence significantly the future of students on the programme of study. |
|  | I confirm that, to the best of my knowledge, the examiner is not significantly involved in recent or current substantive collaborative research activities with a member of staff closely involved in the delivery, management or assessment of the programme(s) or modules in question. |
|  | I confirm that, to the best of my knowledge, the examiner is not a former member of staff or student of Birkbeck College, or if so, that a period of at least five years has elapsed and all students taught by or with the examiner have completed their programme(s). |
|  | I confirm that, to the best of my knowledge, there is no reciprocal arrangement to examine cognate programmes at the external examiner’s institution. |
|  | I confirm that, to the best of my knowledge, the examiner is not succeeding an external examiner who is a colleague from the examiner's home department and institution. |
|  | I confirm, to the best of my knowledge that the examiner is not from the same department of the same institution as another appointed External Examiner. |

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| Additional Ability to Act Comments *(e.g. please explain if reciprocity is unavoidable)* |  |

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| Details of New  Examiner’s  Experience and  Expertise: |  |

**Fees:**

The standard annual fee for External Examiners is £250. If the department wishes to supplement this fee with an additional payment from a local budget, please indicate the amount below:

(N.B. the supplementary fee would remain in place throughout the appointment)

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Signed by Sub-Board Chair: Date:

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ASQ use

Approved by College Board Chair: Date:

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