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|  **Ref: NOMEX FORM (Nov 2024)** |
| **FOR OFFICE USE ONLY**Received by: Date:  | **Student Number:** |

**Nomination of Research Degree Examiners**

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| **IMPORTANT - NOTES ON COMPLETING THIS FORM:** * *Please refer to* [*Research Degree Regulations*](https://www.wlv.ac.uk/about-us/governance/legal-information/regulations-codes-of-conduct-and-bye-laws/academic-regulations/) *– ‘Appendix 8: Guidelines for Nomination of Examiners’ and ‘Appendix 9: External Examiners (Research Degrees) - Process for Checking Right to Work in the UK’ before completing this form.*
* *To be completed by the Director of Studies (or internal supervisor if the DoS is external to the Institution).*
* *Full information is required on this form; otherwise, nominations will not be accepted. Please see Nomex Submission Checklist list form* [Research Forms - University of Wolverhampton (wlv.ac.uk)](https://www.wlv.ac.uk/current-students/student-support/research-degree-student-services/research-forms/)
* *This form must be accompanied by an abbreviated CV, on the CV Template NOMEX form, for each nominated examiner. For template please visit* [Research Forms - University of Wolverhampton (wlv.ac.uk)](https://www.wlv.ac.uk/current-students/student-support/research-degree-student-services/research-forms/)
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**1. THE CANDIDATE**

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| **Name:** |  | **Member of Staff:** | YES/NO\* |
| **Collaborating Establishment:** |  | **Faculty:** |  |
| **Registration start date:** |  | **Mode of Study:** | FT/PT |
| **Expected Date of Examination:** |  | **Award Sought:***(MPhil/PhD/MD/PhD by Published Work/DCounsPsych/EdD/DHW)* |  |
| **Final Title of Thesis:** |  |
| **Does your student have a Tutor Awareness Sheet (TAS)?** | Yes [ ]  | No [ ]  | Don’t Know [ ]  |
| **Is your student happy to share the contents of their TAS with their viva Chair and if appropriate, their examiners?** | Yes [ ]  | No [ ]  | Don’t Know [ ]  |
| **Is there anything that we need to know to ensure that your student can perform at their best during their viva? Please share what you are comfortable sharing in the box below.** |  |

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| **Should access to the thesis be restricted for a period following the examination?**  | NO *(See regulation 9.16 – 9.19)**If YES, complete the ‘Application for Restricted Access of a Research Degree Thesis’ form and submit alongside the NOMEX form.*   |
| **Is the viva intended to be conducted in person?** | YES/NO*If NO, complete the’ Request to conduct a remote viva voce examination’ form and submit alongside the NOMEX form.* *Please note that remote vivas should not be conducted without prior permission from RASC and will only be considered in exceptional circumstances and not as a routine alternative to a face-to-face viva, or as a justification for nominating examiners from outside the UK. Please read the University* [*Policy on remote Viva Voce Examinations*](http://www.wlv.ac.uk/media/departments/research/documents/Policy-on-remote-viva-voce-examinations.doc.docx) *before completing the form.* |
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**2. SUPERVISORS**

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| **Director of Studies:** |  |
| **Second Supervisor(s):** |  |

**3. DETAILS OF THE PROPOSED EXAMINERS**

*(\*If the candidate is a member of staff, 2 external examiners are required)*

 *Where the nomination is for a Professional Doctorate, give details of examining experience at this level.*

**EXTERNAL EXAMINER**

|  |  |
| --- | --- |
| **Title and Name:** |  |
| **Post Title:** |  |
| **Address thesis to be sent to:** |  |
| **Telephone Number:** |  |
| **Email Address:** |  |
| **Research degree candidates previously examined for MPhil** |  | **PhD or Doctorate** |  |
| **Does this External Examiner have the right to work in the UK?** | YES/NO |
| **If Yes, does the External Examiner agree to follow current Government guidelines to confirm that they have the Right to Work in the UK.** | YES/NO |

**Why is this external examiner appropriate?**

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**2ND EXTERNAL EXAMINER (where required)**

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| **Title and Name:** |  |
| **Post Title:** |  |
| **Address Thesis to be sent to:** |  |
| **Telephone Number:** |  |
| **Email Address:** |  |
| **Number of Research degree candidates previously examined for MPhil**  |  | **PhD or Doctorate** |  |
| **Does this External Examiner have the right to work in the UK?** | YES/NO |
| **If Yes, does the External Examiner agree to follow current Government guidelines to confirm that they have the Right to Work in the UK.** | YES/NO |

**Why is this external examiner appropriate?**

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**INTERNAL EXAMINER**

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| **Title and Name:** |  |
| **Post Title:** |  |
| **Room Number and Campus:** |  |
| **Telephone Number:** |  |
| **Email Address:** |  |
| **Research degree candidates previously examined for MPhil or MA/MSc by Research** |  | **PhD or equivalent** |  | **Has the examiner completed an Examiners Course?** |  |

**Why is this internal examiner appropriate?**

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**2ND INTERNAL EXAMINER (where required)**

|  |  |
| --- | --- |
| **Title and Name:** |  |
| **Post Title:** |  |
| **Room Number and Campus:** |  |
| **Telephone Number:** |  |
| **Email Address:** |  |
| **Research degree candidates previously examined for MPhil or MA/MSc by Research** |  | **PhD or equivalent** |  | **Has the examiner completed an Examiners Course?** |  |

**Why have you nominated a second internal examiner and why is this examiner appropriate?**

**4. ARE THERE ANY POTENTIAL CONFLICTS OF INTEREST IN RESPECT TO EITHER OF THE NOMINATED EXAMINERS?**

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**5. FINAL WORDING TO APPEAR ON CERTIFICATE (MPhil/PhD/MD)**

Please indicate the wording which should appear on the final certificate.

**Either:**

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| --- | --- |
| **Full title (as appears in Section 1)** |  |

**Or:**

|  |  |
| --- | --- |
| **In the field of** |  |

**6. STATEMENT BY DIRECTOR OF STUDIES**

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| *I confirm that:* * *to the best of my knowledge the information presented in the form is correct*
* *the external examiner(s) has no link with the research project of the candidate being examined, nor with the research group in terms of joint publications, grants held or other collaboration.*
* *the internal examiner has had no involvement with the programme of research that is the subject of the thesis nor with the candidate in respect of their research degree programme.*

 *Signature of Director of Studies or internal supervisor Date*  |

**7. APPROVAL OF FACULTY RESEARCHER DEVELOPMENT & DOCTORAL STUDIES BOARD**

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| *The above examination arrangements have been considered by the relevant Faculty Researcher Development & Doctoral Studies Board and approval is recommended.**Signature of the Chair of the Faculty Research Student Board (RDDSB) Date*  |

**8. APPROVAL OF COMMITTEE FOR RESEARCHER DEVELOPMENT & DOCTORAL STUDIES**

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| *The above examination arrangements have been considered and approved by the Committee for Researcher Development & Doctoral Studies.**Signature of Chair of the Research Awards sub-committee (CRDDS) Date*  |