



CANDIDATE DETAILS

Given Name:		Surname:	
Student ID:		Programme:	
Academic Unit:		Campus:	

PRIMARY SUPERVISOR

Primary Supervisor:		Email Address:	
Telephone Number:		Cell Number:	

- All examiners are routinely sent a secured PDF copy of the thesis.
- Where a nominee is not employed at a University, is not a senior academic or does not possess a doctoral level qualification a resume/cv **must** be attached. If you are providing web-links to examiner profiles, these must include the last 5 years publications.

PROPOSED INTERNAL EXAMINER

Title: <i>(e.g. Professor, A/Prof, Dr)</i>		Given Name:	
Surname:		Previous Name: <i>(if applicable)</i>	
Highest Qualification:		Telephone Number:	
Institution Obtained:		Mobile Number:	
Current Employer/Academic Institute:		Resume / CV Attached:	
Web-link			
Email Address:			

PROPOSED NEW ZEALAND EXAMINER

Title: <i>(e.g. Professor, A/Prof, Dr)</i>		Given Name:	
Surname:		Previous Name: <i>(if applicable)</i>	
Highest Qualification:		Telephone Number:	
Institution Obtained:		Mobile Number:	
Current Employer/Academic Institute:		Resume / CV Attached:	
Web-link:			
Email Address:			

PROPOSED OVERSEAS EXAMINER

Title: <i>(e.g. Professor, A/Prof, Dr)</i>		Given Name:	
Surname:		Previous Name: <i>(if applicable)</i>	
Highest Qualification:		Telephone Number:	
Institution Obtained:		Mobile Number:	
Current Employer/Academic Institute:		Resume / CV Attached:	
Web-link:			
Email Address:			

PLEASE CONFIRM THE FOLLOWING:

1. All three examiners have been contacted and have agreed to examine the thesis within 6 weeks

2. The candidate and co-supervisor(s) have been consulted as to potential examiners.

3. The candidate does not know the composition of the examination panel.

You have read the [Conflict of Interest Guidelines](#).

You have made every effort to reduce any conflicts of interests

We are in particular seeking assurance that the following are **not** the case:

a) the examiner has published within the last 3 years with the supervisors and/or 5 years with the candidate.

b) the examiner has had input into the candidate's thesis, in a supervisor capacity or otherwise.

c) the examiner has had personal or work relations with the other examiners, the supervisors or the candidate.

If you are not able to confirm the statements 1 – 3 above and/or there are possible conflicts of interest, please explain here:

Please indicate the level of experience of each of the panel members as examiners of doctoral theses:

Please explain/justify the panel composition, in terms of fit, experience, expertise, etc.

Supervisor Name:

Supervisor Signature:

Date:

HEAD OF ACADEMIC UNIT

In signing, you are confirming that you have reviewed the nomination, are satisfied with the composition of the panel and are aware of any cost implications of nominating examiners domiciled outside New Zealand should they be required to attend the oral examination in person.

Head of Unit or Nominee Name:

Head of Unit or Nominee Signature:

Date:

DOCTORAL RESEARCH COMMITTEE

Comments:

Head of Unit or Nominee Name:

DRC Chairperson or Nominee Signature:

Date: