

Student name: _____

ID number: _____

Faculty: _____

Department: _____

Degree: (Please tick as appropriate)

LLM

MA

MArch

MBS

MChir

MD

MEd

MEng

MSc

MTech

Title of Thesis:

Title & Name of Supervisor:

Title & Name of Joint Supervisor:

Title & Name of Internal Examiner:

(as per academic regulations, where the candidate is a UL staff member, the internal examiner is replaced with a second external examiner)

Title & Name of External Examiner:

Result of *viva voce* examination if required: (Please tick as appropriate)

SATISFACTORY

NON-SATISFACTORY

Name of *Viva Voce* Chairperson:

Signature of *Viva Voce* Chairperson:

Date:

Signature of Internal Examiner:

Date:

Signature of External Examiner:

Date:

Signature of External Examiner:

Date:

- The ability of the student to defend the research in the oral examination (only where masters by research candidates are requested to undertake a *viva voce* examination)
- The nature of the amendments and/or corrections required
- Conclusion and award recommendation

Where the examiners' report is submitted in a language other than Irish or English, the report should contain a summary paragraph written in English that specifies the overall conclusion and award recommendation.

Recommendation:

In the case of a master's degree, the examiners must make one of the following recommendations on the examiners' report form:

- | | Tick |
|--|--------------------------|
| a. The degree of Master of _____ be awarded | <input type="checkbox"/> |
| b. The degree of Master of _____ be awarded subject to the correction of any minor errors within a period of three months for reconsideration by the internal examiner | <input type="checkbox"/> |
| c. The degree of Master of _____ be awarded subject to completion of any prescribed amendments within a period of six months for reconsideration by the internal or external or internal & external examiner (please select one option only) | <input type="checkbox"/> |
| d. No degree be awarded and the candidate continue on the masters register | <input type="checkbox"/> |
| e. No degree be awarded | <input type="checkbox"/> |

As per academic regulations: Where both examiners are in agreement on the content of the report, a single report signed by both will fulfil this requirement. If a disagreement arises between the examiners, the chairperson is required to clarify and, where possible, reconcile differing viewpoints. If this is not possible, the examiners should submit separate reports to Graduate & Professional Studies.

Signature of External Examiner: _____ Date: _____

Signature of External Examiner: _____ Date: _____

I, the undersigned internal examiner, confirm that I have read the thesis and the report of the external examiner, and I concur with the assessment of the thesis.

Signature of Internal Examiner: _____ Date: _____

Please Note: Graduate and Professional Studies will request an email confirmation from the relevant examiner(s) indicating that the minor errors and/or prescribed amendments have been corrected and completed respectively; this email confirmation must be undertaken when the final version of thesis is being submitted to the Graduate & Professional Studies.

Please return this completed form and attach the examiners' report to the Graduate & Professional Studies, Engineering Research Building, University of Limerick, Limerick, Ireland. Email GPSResearch@ul.ie