

NOMINATION OF EXAMINERS FOR A MASTER'S CANDIDATE

1. STUDENT INFORMATION

Title, initials and surname				
Student number				
Year first registered for MA		Programme		
Weight of thesis [tick the appropriate option]	100%		50%	
Title of thesis				

2. SUPERVISOR(S) INFORMATION

Supervisors, co-supervisors and examiners must each have a Master's degree.

Supervisor

Title, first name & surname	
Primary email address	
Secondary email address	
Primary contact number (with country code)	
Department & institution	
Highest qualification obtained (Please specify degree and subject)	

Co-supervisor

Title, first name & surname	
Primary email address	
Secondary email address	
Primary contact number (with country code)	
Department & institution	
Highest qualification obtained (Please specify degree and subject)	

3. EXAMINATION PANEL

Guidelines

- A Master's thesis must be examined by two examiners.
- The independent internal examiner should be appointed at Stellenbosch University. Extraordinary lecturers/professors and research fellows at SU are considered internal examiners.
- The independent external examiner should be appointed at any other university or research institution in South Africa. In both cases, their professional affiliation must be stated.

- A person who was previously associated with or appointed at SU must have not been in service of this university for a period of at least three years before that person can be appointed as an external examiner.
- In exceptional cases, an independent international examiner may be considered, however, supervisors must provide a thorough academic motivation for such an appointment.
- **IMPORTANT:** Only electronic versions of the thesis will be sent to examiners, who are welcome to print their own hard copies.

Independent internal examiner

Title, first name & surname	
Primary email address	
Secondary email address	
Primary contact number (with country code)	
Department & institution	
Highest qualification obtained (Please specify degree and subject)	

Independent external examiner

Title, first name & surname	
Primary email address	
Secondary email address	
Primary contact number (with country code)	
Department & institution	
Highest qualification obtained (Please specify degree and subject)	

Motivation for the nomination of an international examiner [if applicable]	
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Confirmation that the proposed external examiner does not have an extraordinary or research appointment at SU and that there is no conflict of interest relating to the examination of this thesis.

Signature of Departmental Chair

Date

[This completed and signed form must be emailed to fasscomm@sun.ac.za.]