**Nomination for the NEW appointment of a Module External Examiner**

**and/or Progression and Award Board External Examiner for Undergraduate**

**and Taught Postgraduate courses**

**To be completed by Course Director or designated Primary Contact.**

**All fields MUST be completed. Incomplete forms will be returned until a complete version is submitted.**

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| **Appointment Type**  *Please select one or both as appropriate* | |
| Module and Award Board (MAB) External Examiner  *Refer to* [Criteria for Module External Examiner](https://www.canterbury.ac.uk/quality-and-standards-office/external-examiners/information-for-staff.aspx) *for eligibility* |  |
| Progression and Award Board (PAB) External Examiner  *Refer to* [Criteria for a PAB examiner](https://www.canterbury.ac.uk/quality-and-standards-office/external-examiners/information-for-staff.aspx#collapseFive) *and Section 5 for eligibility* |  |

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| **Section 1 – CCCU Primary Contact Details**  *This will be the EE’s Primary Contact responsible for all course-related induction, communication and support during the full term of appointment.* | |
| Title and name: |  |
| Current position: |  |
| Faculty: | Choose an item. |
| School: |  |
| Email address |  |

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| **Section 2 – Proposed External Examiner Details** | |
| Title and name: |  |
| Current position: |  |
| Current employer/institution: |  |
| Faculty / Department  *(HE and FE staff only)* |  |
| Email address (own institution): |  |
| Telephone number: |  |
| EE Experience:  Previously been an EE?  Currently an EE elsewhere?  *If Yes, which institution and start/end dates:* | Yes  No  Yes  No  Completed HEA EE Training: Yes  No |
| PSRB Registration Details:  *Where relevant add all applicable details or N/A* | N/A  PSRB Name:  Registration Type:  Registration Number:  Expiry date: |

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| **Section 3 – Confirmation regarding Conflict of Interest for MAB and PAB Roles**  *The University’s* [*Restrictions of Appointment categories*](https://www.canterbury.ac.uk/quality-and-standards-office/external-examiners/information-for-staff.aspx) *can be found on the QSO website* | | | |
| Do any of the categories listed in the restrictions of appointment section apply to this nominee? | | Yes | No |
| If ‘Yes,’ please give details |  | | |

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| **Section 4 – MAB and PAB Appointment Details** | | |
| *MAB and PAB Contracts usually start with the new academic year, on 1 September for duration of 4 years + 2 months.* | | |
| Starting academic year *e.g. 2021-22* |  |  |
| Duration of MAB and/or PAB appointment:  *Where different from the standard duration and add a comment below.* | years | N/A |
| **MAB only:** Course Start Date:  *When not starting at the beginning of the new academic year and add a comment below.* | *(mm/yyyy)* | N/A |
| Does the nominee replace an existing MAB External Examiner? | Yes | No |
| Comment: N/A | | |

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| **Section 5 – For MAB Nomination** |
| **How does the nominee meet the** [Criteria for Module External Examiner](https://www.canterbury.ac.uk/quality-and-standards-office/external-examiners/information-for-staff.aspx)?  Please provide a brief comment on how the proposed nominee meets the Module EE criteria, including any relevant PSRB information, if applicable. To be used alongside nominee’s CV. |
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| **Section 6 – For PAB Nomination Eligibility** | |
| To serve as an External Examiner at CCCU Progression and Award Boards, the following criteria must be demonstrated. Please check below as appropriate: | |
| 1. Knowledge and understanding of UK sector agreed reference points for the maintenance of academic standards and assurance and enhancement of quality |  |
| 1. Competence and significant experience of managing assessment processes and in applying academic regulations |  |
| 1. Suitability to meet any applicable criteria set by professional, statutory or regulatory bodies. |  |

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| **How does the nominee meet the criteria for PAB External Examiner?**  *Please provide brief comment on how the proposed nominee meets the PAB EE criteria. To be used alongside nominee’s CV.* |
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| **Section 7 – For MAB assignments** | | | | | | |
| **Courses Details:**  **N/A**  *If assigning short courses only*  *For all courses related to modules being assigned, including those provided by collaborative partner franchises. Add further rows if more courses.* | | | | | | |
| **Details of Course 1** | | | | | | |
| **SITS Course code** | **Course Title** | **Academic Calendar**  *Refer to* [*Academic Calendars*](https://www.canterbury.ac.uk/our-students/ug-current/academic-services/timetable-and-dates/university-dates-2023-24) | **Course Director** | **Campus/es**  *Full name & acronym of ALL campuses assigned to this EE* | **Collaborative partner/s**  *Full name & acronym*  *Or* ***N/A****)* | **Academic Link Tutor**  *(If none write* ***N/A****)* |
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| **Details of Course 2** *(if applicable)* | | | | | | |
| **SITS Course code** | **Course Title** | **Academic Calendar**  *Refer to* [*Academic Calendars*](https://www.canterbury.ac.uk/our-students/ug-current/academic-services/timetable-and-dates/university-dates-2023-24) | **Course Director** | **Campus/es**  *Full name & acronym of ALL campuses assigned to this EE* | **Collaborative partner/s**  *Full name & acronym*  *Or* ***N/A****)* | **Academic Link Tutor**  *(If none write* ***N/A****)* |
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| **Details of Modules being examined:**  **N/A**  *If assigning short courses only*  *For all modules being assigned to the EE, including provisions by collaborative partner franchises* | | | | | | | | |
| ***SITS Module code\**** | ***Module Title*** | ***Level*** | ***Sample reviewed***  ***Y /***  ***N (level 0, 4)*** | ***Credits per module*** | ***Institutions per Module or N/A***  *One institution per line* | ***Offerings*^** | ***Total number of Credits*** | ***Name of EE being replaced or N/A*** |
| *Example* | *Basket weaving for beginners introduction* | *4* | *N* | *20* | *CCCU* | *1* | *0* | *N/A* |
| *Example* | *Basket weaving for beginners introduction* | *4* | *N* | *20* | *Kent college* | *1* | *0* | *N/A* |
| *Example* | *Basket weaving for intermediate* | *5* | *Y* | *20* | *Kent college* | *2* | *40* | *N/A* |
| *Example* | *Basket weaving for intermediate* | *5* | *Y* | *20* | *Southeast London* | *1* | *20* | *N/A* |

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| **SITS Module code\*** | **Module Title** | **Level** | **Sample reviewed**  **Y /**  **N (level 0, 4)** | **Credits per module** | **Institutions per Module or N/A**  *One institution per line* | **Offerings^** | **Total number of Credits** | **Name of EE being replaced or N/A** |
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**NOTE:**

* The nominee is expected to review samples of all modules where “Samples reviewed” is Yes in the table, usually for Levels 5, 6, 7.
* All levels of modules can be assigned to an External Examiner (including levels 0 and 4), to enable consultation.
* \*Module codes may not be available for new modules
* ^Number of Offerings of the Module in an Academic Year to be considered by the External Examiner.
* Total number of credits are the amount being assigned to the EE per module per offering.

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| **Short courses to be examined** | | | **N/A** | |
| **Short Course**  **Code** | **Short Course Title and Award** | **Duration** | **Course Director** | **EE being replaced** |
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| **Section 7 – MAB Fee calculation**  *More information on* [*External Examiner fee structure*](https://www.canterbury.ac.uk/quality-and-standards-office/external-examiners/information-for-staff.aspx) *can be found on the QSO website* | |
| Total number of credits to be examined  *(Please do* ***NOT*** *include modules where samples are not reviewed in this total i.e. levels 0 and 4)* |  |
| Number of short courses |  |
| Number of **half-days** attendance per year and site visit details.  ***Essential*** *partner or campus site visits are agreed with External Examiner as part of this role, if required.*  *Site visits must be University business within the UK. Working hours only and will not include attendance at Boards of Examiners as these are held remotely* |  |

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| **Section 8 – Authorisation of the Nomination** |

The nominee has confirmed a willingness to serve and is not included in any categories or circumstances listed in [Restrictions in Appointment.](https://www.canterbury.ac.uk/quality-and-standards-office/external-examiners/information-for-staff.aspx) The nominee has not been a member of staff or a student at Canterbury Christ Church University within the last five years.

I confirm that approval of this appointment would not create a reciprocal arrangement with a cognate programme at another institution.

**Please return the completed form along with a copy of the candidate’s CV to your Faculty Quality Office.** **Digital signatures accepted.**

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| **COURSE DIRECTOR PRINTED NAME** |  | | |
| **COURSE DIRECTOR SIGNATURE** |  | **DATE** |  |

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| **HEAD OF SCHOOL PRINTED NAME** |  | | |
| **HEAD OF SCHOOL SIGNATURE** |  | **DATE** |  |

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| **FACULTY DIRECTOR OF QUALITY PRINTED NAME** |  | | |
| **FACULTY DIRECTOR OF QUALITY SIGNATURE** |  | **DATE** |  |

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| Additional comments if required: N/A |

**For nominations of DClin External Examiner only:**

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| **DEAN OF GRADUATE COLLEGE PRINTED NAME** |  |  |  |
| **DEAN OF GRADUATE COLLEGE SIGNATURE** |  | **DATE** |  |

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| **CHAIR OF RESEARCH DEGREES SUBCOMMITTEE PRINTED NAME** |  |  |  |
| **CHAIR OF RESEARCH DEGREES SUBCOMMITTEE SIGNATURE** |  | **DATE** |  |

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| Additional comments if required: N/A |

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**Faculty Quality Office ONLY**

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| Submitted to Quality and Standards Office  [external-examiners@canterbury.ac.uk](mailto:external-examiners@canterbury.ac.uk) | **DATE** |  |