

# 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	
Mobile number (with country	
code)	
Department	
Highest qualification obtained	
(Please specify degree and	
subject)	

# Co-supervisor

Title, first name & surname	
Primary email address	
Secondary email address	
Mobile number (with country	
code)	
Department	
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		
Mobile number (with country		
code)		
Department		
Highest qualification obtained		
(Please specify degree and		
subject)		
Independent external examine		
Title, first name & surname		
Primary email address		
Secondary email address		
Mobile number (with country		
code)		
Department		
Highest qualification obtained		
(Please specify degree and		
subject)		
Motivation for the nomination of an international examiner [if applicable]		
		does not have an extraordinary or conflict of interest relating to the
Signature of Department	l Chair	Date
This completed and sign	ned form must be email	ed to fasscomm@sun ac za 1