

Appendix to External Examiner's Report

FOR COMPLETION BY THE CHAIR OF DEPARTMENT (OR NOMINATED DEPUTY).

This page will be copied to the External Examiner concerned.

Please complete and return this form to Mrs Jo Latimer in the Examinations Section, Academic Office, University House, by not later than the end of Week 4 of the Autumn Term.

Section A

I have noted any recommendation in the Report specified below and propose the following action (please indicate by whom the action will be taken and by when):

Section B

I confirm that the Report is accurate in matters of fact: YES/NO

If "NO", I have the following comments:

I confirm that the report has been considered by my department:

SIGNED:..... DATE:.....

NAME AND TITLE:.....

Name of External Examiner:	
Course(s) to which report refers:	
Date of report:	
Academic year to which report refers:	