

Notification of Readiness to Submit Thesis & Appointment of Examiners

To enable this electronic form, you must first **SAVE** it then **REOPEN** as a PDF file (it will not function properly when used in a browser window).

To facilitate the timely appointment of examiners, a candidate shall give not less than two months' notice in writing to the Research Office of intention to submit the thesis or portfolio. The student should not be aware of the final examiner details provided on this form.

1. Student Details

Title	<input type="text"/>	First Name	<input type="text"/>	Last Name	<input type="text"/>
Email	<input type="text"/>			ID number	<input type="text"/>
School or Centre	<input type="text"/>	Faculty <select>	<input type="text"/>		
Course Code	<input type="text"/>	Course Name	<input type="text"/>		

2. Thesis Details

Thesis Title:	<input type="text"/>	Expected Submission Date:	<input type="text"/>
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Is the expected submission date after minimum candidature time? Yes No

- I confirm that I have discussed the submission of thesis and appointment of examiners process with the student. The student should not be aware of the final examiner details provided on this form.

3. Appointment of Examiners

Three Examiners required for a PhD and Research Professional Doctorate, Two Examiners required for a Masters.

I have read and understood the [Appointment of Examiners Guidelines](#) and [Conflict of Interest Guidelines](#)

Examiner One *Must be external to CSU for PhD, Professional Doctorate and Masters*

Title First Name Last Name

Position Title Institution

Email Phone:

Preferred Mailing: Street Address:

Town/City State Postcode Country

Justification
for Appointment:

Examiner Two *Must be external to CSU for PhD and Professional Doctorate, preferably external for Masters*

Title First Name Last Name

Position Title Institution

Email Phone:

Preferred Mailing: Street Address:

Town/City State Postcode Country

Justification
for Appointment:

Examiner Three *Preferably external for PhD and Professional Doctorate*

Title First Name Last Name

Position Title Institution

Email Phone:

Preferred Mailing: Street Address:

Town/City State Postcode Country

Justification
for Appointment:

Optional Alternate Examiners

Two optional alternate examiners may be nominated below, please discuss the inclusion of these additional nomination(s) with your Sub Dean (Graduate Studies) before completing this section.

Optional Alternate Examiner One

Title First Name Last Name

Position Title Institution

Email Phone:

Preferred Mailing: Street Address:

Town/City State Postcode Country

Justification
for Appointment:

4. Approvals and Authorisations

PLEASE NOTE: This is an electronic form and requires the below authorisations in the order they appear. After each authorisation this report needs to be emailed to the next signatory by clicking the 'submit by email to next signatory' button and entering in the next recipient's email address. For any queries about this form please contact the [Research Office](#).

- All examiners above have been contacted to confirm availability and are recommended for appointment.
- Current address details provided for each examiner.
- CV's attached as PDF's for each examiner including a list of publications within the last 5 years.

Human/Animal Ethics and Compliance approvals are:

- Required and approved Required and not approved Not required

Are you aware of any potential conflict of interest in relation to the examiner appointments? Yes No

If yes,
please specify:

Principal Supervisor: *I recommend the appointment of the potential examiners.*

Name Signature Date:

Associate or Sub Dean (Graduate Studies): *I confirm that there are no conflicts of interest with the examiners and endorse this recommendation for the appointment of examiners.*

Name Signature Date:

Research Office Use Only:

Minimum Candidature:

Maximum Candidature:

Soft Bound Thesis Received:

5. Research Committee Approval

Research Committee Approval:

I approve the appointment of these examiners.

Name Signature Date: