|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Application For Approval Of An Extension Of Appointment or  A Reallocation Of Duties Between (Already Approved) External Examiners For A Taught Course | | | | |
| **Form EXN 2 should ONLY be used to propose extensions of appointment (for one additional year only) and/or reallocations of duties** between approved external examiners.  This form should be submitted to the relevant University Executive Manager ideally **at least six months** before the External Examiner would be due to commence their new duties / extended year of tenure.  **Process:** Subject Leads/Course Leads and the Head of School/Department should ensure that the criteria for extension / reallocation of duties have been fully met before submission of the application to the relevant School Academic Committee and to Academic Committee and Senate respectively.  **Please note:** This form should only be completed in exceptional circumstances and must include a strong rationale as to why a reallocation of duties / extension of tenure is necessary. | | | | |
| ***Details Of External Examiner*** | | | | |
| **Name:** | |  | | |
| **Current Institutional Affiliation:** | |  | | |
| **Address For Correspondence:** | |  | | |
| **Telephone / Email:** | |  | | |
| **Details Of All Majors / Courses / Award(s) For Which The Examiner Currently Has Responsibility / Shared Responsibility:** | |  | | |
| **Host /School/Department:** | |  | | |
| **Details Of Any Other External Examiner Appointment Held (Details should include names of institutions, course titles, level and dates of appointment).** | |  | | |
| **Application Relates To** | | Extension of Tenure | |  |
| Reallocation of Duties | |  |
|  | | | | |
| *Extension of Tenure* *(Note that External Examiners are appointed for a maximum period of four academic years. In exceptional circumstances, the Regulations allow for an extension for one further year)* | | | | |
| **Major / Courses to which the extension relates:** | |  | | |
| **Current dates of appointment** | | From To | | |
| **Period of proposed extension** | | From (month/year) To (month/year) | | |
| ***Reallocation of duties*** | | | | |
|  | |  | | |
| **Reallocation (assessment for which examiner is to have responsibility, with average student numbers where known).** | |  | | |
|  | | | | |
| ***Rationale for Proposed Extension / Reallocation of Duties*** | |  | | |
|  | | | | |
| ***Approval*** | | | | |
| Completed forms should be sent to the relevant University Executive Manager who will liaise with the Head of /School/Department to ensure School Academic Committee endorsement prior to applications being sent to Academic Committee for consideration. | | | | |
| **Head of /School/Department** |  | | Date | |
|  | | | | |
| **Endorsed (signed) by School Academic Committee (Chair)** |  | | Date | |
| **Academic Committee Minute Reference** |  | | | |

**Please return completed forms to:**

Mr. Chris Leyland (Education & Social Sciences)

Mrs. Sarah Meir (Law, Business School & Humanities)

Ms. Natalie Dermott (Creative & Performing Arts)

Ms. Jane Blackmore (Psychology, Geography & Environmental Science, Health Science and Mathematics, Computer Science & Engineering)

If you have any questions about the form, please contact the relevant University Executive Manager for your School/Department in the first instance.