

External Examiner Report

Please return this form to the Graduate Program Coordinator.

Candidate Information

Name: _____

Program: _____

Thesis title: _____

Comments

- Please attach any comments, feedback or questions for the candidate.
- If you are unable to attend the defence, please provide a list of questions that will be posed to the candidate during the oral examination.

Approval

By signing below, I certify that the thesis is (please check one):

- Acceptable and ready for defence with minor revisions
- Able to be defended but requiring major revisions
- Not acceptable and not ready for defence

Name of Examiner: _____

Signature: _____ Date: _____

Distribution: Original with Office of Research and Graduate Studies; copies to Supervisor and Program Coordinator.