The examiner should complete and return the MSc by Research Examiner Report Form to the College Office.

Examiners are reminded that Examiner Reports will be made available to students and their supervisor(s) after the result has been ratified by the College Postgraduate Committee.

***\*\*\*Please note: The initial recommendation must be made independently of the Internal Examiner’s decision. If initial examiner recommendations differ significantly, the Internal Examiner will be asked to contact the External Examiner in attempt to reach a joint recommendation. In the event that the examiners are unable to agree on a joint recommendation, an additional examiner will be appointed. \*\*\****

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| **Name of Student:** |  | **UUN** | S |
| **Title of Research Project/Dissertation:** |  | | |
| **Degree sought:** |  | | |

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| **Name of examiner:** |  | | |
| **Email:** |  | **Tel No:** |  |

**The completed report should be returned as an email attachment to the College at:**

*[College email address]*

(emailed reports need not be signed but should be sent from institutional email address)

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Date received:

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| --- |
| **General Assessment:**  Please answer the specific questions below (Yes/No/Not Applicable (NA)).   * Is it clear which parts of the work are the student’s own? \*YES/NO/NA * Is any non-original work adequately referenced? \*YES/NO/NA * Is there enough of the student’s own work? \*YES/NO/NA * Does the candidate show an adequate knowledge of the field and its literature? \*YES/NO/NA * Does the work define objectives and a clear focus? \*YES/NO/NA * Is the work clearly structured? \*YES/NO/NA * Is the work indicative of an ability to undertake research? \*YES/NO/NA * Are the methods and arguments generally sound? \*YES/NO/NA * Is the presentation of the dissertation satisfactory? \*YES/NO/NA   *Please delete alternatives which do not apply. Where it is not possible to give a definite response, please indicate this above and provide your reasons below.* |

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| --- | --- |
| Examiner Comments: please provide **detailed** feedback on the student’s research project/dissertation under each of the section headings.  *\*Please note that these comments are intended for both the Board of Examiners and the student\** | |
| Introduction:  Methods:  Results:  Discussion and Conclusion:  Summary and Recommendation: | |
| **Recommended Award** | **Fail/Exit Award/Resubmission/Pass/Merit/Distinction**  *(Please delete as appropriate)* |
| Please provide comments on why you have recommended this award.  *\*Please note that this must be completed\** |  |

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| --- | --- | --- | --- |
| Signature: |  | Date: |  |

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| **Examiner Comments after assessment – Feedback** | |
| **Were the arrangements for receiving the dissertation and returning your report satisfactory?** | YES NO |
| Comments: | |

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| --- | --- |
| **Did the examination form offer you clear guidance on your role and on what recommendations you could make?** | YES NO |
| Comments: | |

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| **Are there any academic or other issues of wider concern which you would like to raise?** | YES NO |
| Comments: | |

**Document control**

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