** External Examiner Nomination Form**

**Please complete the form electronically or print clearly**

*Sections A, B, C and D are to be completed by the nominated* ***External Examiner***

### Part A: Personal Details

|  |  |
| --- | --- |
| **Title:** |  |
| **Forename(s):** |  |
| **Surname:** |  |
| **Home Institution:** |  |
| **Home Institution address** (including department)**:** |  |
| **Telephone number:** |  |
| **Email address:[[1]](#footnote-1)** |  |
| **Correspondence address** (if different from above)**:** |  |

### Part B: Eligibility and Selection

*Please complete the boxes with* ***Y (yes)*** *or* ***N (no)*** *as appropriate*

|  |  |
| --- | --- |
| Are you familiar with the standards and procedures of university level education in the United Kingdom |  |

|  |  |
| --- | --- |
| Have you been a lay member of the Council of King’s College London (KCL) or a student of the College within the last three years? |  |

|  |  |
| --- | --- |
| Have you previously held an External Examiner position at KCL? |  |

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| --- | --- |
| Have you been involved in the approval procedures for a programme of study of KCL or in a validation event for a programme of KCL? |  |

|  |  |
| --- | --- |
| Do you have a close professional, contractual or personal relationship with a member of staff or student involved with the programme of study |  |

|  |  |
| --- | --- |
| Have you been significantly involved in recent or current substantive collaborative research activities with a member of staff closely involved in the delivery, management or assessment of the programme(s) or modules in question |  |

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| If **yes** to any of the above please provide details, along with dates: |
|  |

|  |  |
| --- | --- |
| To your knowledge, is there a member of staff at KCL appointed by your institution in the capacity of External Examiner in the same subject in which you are nominated to examine at King’s? |  |

|  |
| --- |
| If **yes**, please state the name of the External Examiner and the subject |
|  |

|  |
| --- |
| Please provide details of current External Examiners positions held, including dates when tenure ceases |
| Position held | Date when tenure ceases |
|  |  |

**Eligibility to work in the United Kingdom**

As you may be aware, the UK Border Agency requires that all of those undertaking work in the UK have the legal right to do so. In order to undertake the above work you must verify your eligibility to work in the UK and you are asked to complete the self assessment process set out below and attach any supporting documentation that may be required. The appointment as an external examiner is subject to this self-declaration being completed and the provision and verification of appropriate copy documentation being forwarded, where required, to the Quality, Standards and Enhancement office.

Please indicate which statement below applies to you by placing a tick in the appropriate box and inserting the name of your current university as may be appropriate.

|  |  |  |
| --- | --- | --- |
| 1 | I am both a British Citizen (United Kingdom passport holder) and an **employee** of a British university or institution.Specify university or institution: ...................................................................... |  |
| 2 | I am an EU national and have a visa which allows me to undertake work in the UK and an **employee** of a British university or institution.Specify university or institution: ...................................................................... |  |
| 3 | I am a non European migrant and have a visa which allows me to undertake work in the UK. |  |
| 4 | I have a Tier 2 visa and this work meets the UKBA “Supplementary employment criteria” as follows:* The King’s College London work is work in the same sector and at the same professional level as the work for which my Certificate of Sponsorship was assigned; and
* The time taken for this and supplementary employment I undertake for any other employer is no more than 20 hours per week; and
* Is undertaken outside of the normal working hours for which my certificate of Sponsorship was assigned.

Specify university: ............................................................................... |  |
| 5 | None of the above applies. |  |
|  |  |   |   |

If you have ticked statement **1** you need to attach a copy of the front cover and photo page of your passport.

If you have ticked statement **2, 3** or **4** you need to attach a copy of the front cover and photo page of your passport and evidence of your right to work in the UK to this document.

If you have ticked statement **5** we will need more information in order to determine whether you can undertake this work. Please could you attach a copy of the front cover and photo page of your passport and any and documentation that will allow us to determine if you are able to undertake this work.

### Part C: Qualifications and Employment

*Please attach a* ***CV*** *along with the information detailed below.*

*We would be grateful if this CV could highlight your education responsibilities and experience*

|  |
| --- |
| Please give details of your **qualifications** with the dates when they were obtained: |
| **Qualifications** | **Dates** |
|  |  |

|  |
| --- |
| Please give details of your **employment history** with any relevant dates: |
| **Positions** | **Dates** |
|  |  |

|  |
| --- |
| Please give any further details which may be relevant to your appointment: |
|  |

**Part D: Declaration**

To the best of my knowledge, the particulars given by me on this form are correct and I agree to conduct all of the duties of the role as laid out in the College regulations. If at any time I fail to fulfil these duties or have given inaccurate information I am aware my contract will be terminated.

|  |  |
| --- | --- |
| Signed\* |  |

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

### Part E: Programme Details

*Section E is to be completed by the* ***Programme Assessment Sub-Board Chair****.*

|  |  |
| --- | --- |
| **Award of Programme to which Examiner is to be appointed** (e.g. BSc, BA, MMus, Diploma etc.): |  |
| **Title of Programme** to which Examiner is to be appointed: |  |
| **Specific subject(s) or programme(s) or module(s)**, if applicable: |  |
| **Approximate number of students the External Examiner will be covering** |  |
| **Name of Programme Assessment-Sub Board** to which Examiner is to be appointed: |  |
| **Name and Institution (including Department) of External Examiner being replaced**, including date when tenure ceases\*: |  |
| **Date of commencement of appointment** (month/year): |  |
| **Academic year in which tenure commences**: |  |
| **Proposed date that External Examiner will be invited to attend Induction** |  |
| **Any other details** specific to this appointment e.g. if the Examiner only acts every other year due to the Board only meeting then or the tenure of this Examiner differs to the usual timescale |  |

**\*** Please note that the proposed External Examiner should not normally be from the same Institution that the Examiner leaving is from

**Approval by Chair of Nominating Programme Assessment Sub-Board:**

|  |  |
| --- | --- |
| Name of Assessment Sub-Board Chair: |  |

|  |  |
| --- | --- |
| Signature\* |  |

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

***Faculties (Institutes/School) are requested to keep a copy of completed nomination forms on file***

### Part F: Approval

Nominations for External Examiners are made by the Programme Assessment Sub-Board for approval by the relevant Faculty (Institute/School) Assessment Board and must be signed off by the Chair of Assessment and Standards Sub-Committee, except in the cases of Faculty (Institute/School) without Programme Assessment Sub-Boards, in which case nominations are approved solely by the Assessment and Standards Sub-Committee.

**Approval by Chair of Faculty (Institute/School) Assessment Board:**

|  |  |
| --- | --- |
| Name: |  |

|  |  |
| --- | --- |
| Signature\* |  |

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

***Completed forms should be returned to Academic Regulations, Quality & Standards at*** ***ARQS@kcl.ac.uk***

**Assessment and Standards Sub-Committee authorisation:**

|  |  |
| --- | --- |
| Name: |  |

|  |  |
| --- | --- |
| Signed: |  |

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

|  |  |
| --- | --- |
| **Appointment approved** |  |

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| --- | --- |
| **Appointment not approved** (and reason given below): |  |
| **Reason:** |  |
|  |  |

**Normally the appointment will commence upon the expiry of the appointment of the previous External Examiner and will coincide with the start of the academic year.**

**\***Signatures may be electronic or the form may be sent from an official email address. Where email addresses are used, the Faculty (Institute/School) Board Chair will need to attach the confirmation email from both the External Examiner and the Programme Assessment Sub-Board Chair when the form is submitted to Quality, Standards and Enhancement office.

### Part G: Fees

**Quality, Standards and Enhancement endorsement**

Following approval in 2013/14 by the Principal’s Central Team, from 2014/15 new External Examiners will be allocated a fee band. This fee-band is dependent on the approximate number of students the External Examiner will be overseeing.

Quality, Standards and Enhancement office will provisionally allocate new external examiners to a band based on FTE and board chairs may make representations if they disagree with the assessment, e.g. because of other factors related to workload. The final decision on an examiner’s payment band will rest with the Associate Director, Quality, Standards and Enhancement

The fee-bands are as follows:

If less than 10 FTE’s: £350

10 – 75 FTE’s: 500

75 – 100 FTE’s: 600

100+FTE’s: 750

1. This will be the College’s primary method of correspondence with you [↑](#footnote-ref-1)