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**RS11b**

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**Oral Examination Consent Form**

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| **Students** | | | | |
| Name: | | Campus: | | |
| Registration Number: | | Faculty: | | |
| Mode of Study: Full-time  Part-time | | Source of funding: | | |
| Date of initial registration: | | Degree Registered For: | | |
| Title of Research Programme: | | | | |
| **Supervisory Details** | | | | |
| Supervisor (i) |  | | School |  |
| Supervisor (ii) |  | | School |  |
| Supervisor (iii) |  | | School |  |
| **Student Consent** | | | | |
| The Student may give consent for one named supervisor to attend the oral examination.  This form has been devised to seek explicit permission from the student as to which supervisor, if any, may accompany the student to the forthcoming oral examination.  I give explicit consent for ……………………………………………………. (name of supervisor)  to attend the forthcoming oral examination  I do not give consent for my supervisor to attend the forthcoming oral examination  Signed: …………………………………………………………(student)       (date) | | | | |

(This form should be returned to the Doctoral College, Jordanstown, for research students on the Jordanstown and Belfast campuses; or to the Doctoral College, Coleraine for research students on the Coleraine and Magee campuses.)