

UNIVERSITY OF VICTORIA

REQUEST FOR ORAL EXAMINATION

This form must be completed and forwarded to the Office of the Dean of Graduate Studies at least 4 weeks BEFORE the anticipated date of the oral examination. If there are extenuating circumstances that may result in your being unable to meet this deadline, alternative arrangements should be made through consultation with the Associate Dean of Graduate Studies.

Doctoral candidates must deposit two copies of the dissertation in the Office of the Dean of Graduate Studies together with this form. At that time they must sign a Ph.D. Declaration Form "in person." If the student is away, they must come into the Office of the Dean of Graduate Studies sometime before the oral examination and sign the form.

Master's candidates must deliver one copy of the thesis/research paper to the External Examiner. One further copy must be deposited in the Office of the Dean of Graduate Studies at least 2 weeks prior to the date of the oral examination.

Student Name: _____ Student No: _____

Department: _____ Degree: _____

Day: _____ Date: _____ Time: _____ Location: _____

Dissertation/Thesis Title: (please type) _____

_____ Unit value _____

Supervisory Committee:

Name

Signature

Supervisor _____

Departmental Member _____

Departmental Member _____

Outside Member _____

Additional Member: _____

In the case of a thesis/dissertation, the above signatures indicate that they have examined the thesis/dissertation and are satisfied that it represents an examinable document for the degree requirements and confirm this request for defense.

Name

Signature

Graduate
Adviser:

The signature of the Graduate Adviser indicates that correct administrative procedures have been followed within the department or school. The signature also indicates that correct thesis/dissertation preparation procedures have been followed and that a copy is available in the department/school General Office.

EXTERNAL EXAMINER:

Please ensure that the following information is complete. Doctoral candidates must submit a copy of the proposed external examiner's current Curriculum Vitae (or equivalent), together with this form. The supervisor **MUST** have contacted and confirmed with the external Examiner **PRIOR** to the submission of this form.

Name: _____

Address: _____

Phone No.: _____ Fax No: _____

E-mail: _____

Comments: _____

*In the case of Ph.D. examinations, it is expected that Supervisors and/or Departments will cover the External Examiner's travel expenses which **EXCEED** the amount provided by Graduate Studies.

* Please note that for a Master's examination, the Faculty of Graduate Studies does not have a budget to cover any expenses that may be incurred.

Supervisor covering remainder of expenses?

YES

NO

Department covering remainder of expenses?

YES

NO

*If this is a Ph.D. examination please indicate if you are interested in holding the oral by:

Audio-conferencing?

YES

NO

Video-conferencing?

YES

NO

If "yes" for video-conferencing, please provide the name of a technical contact at the External Examiner's University.

Name: _____

Phone: _____

E-mail: _____

Revised October 1998