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| **Guidance & Instructions for Completion of Form**   * Please refer to the [Guidance on Electronic Completion & Submission of PGR Forms](https://www.dcu.ie/registry/postgraduate-research-academic-regulations-guidelines-registry) prior to completion of the report. Only typed forms will be accepted. * Completed reports must be submitted to [postgraduate.research@dcu.ie](mailto:postgraduate.research@dcu.ie) at least two weeks in advance of the Graduate Research Studies Board (GRSB) meeting. [Please click here for Registry submission deadlines](https://www.dcu.ie/registry/postgraduate-research-registry). |

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| 1. **CANDIDATE DETAILS** *(To be completed by Candidate)* | | | |
| **Name of Candidate** |  | | |
| **ID Number** |  | | |
| **Academic Year** |  | **Faculty** |  |
| **Title of Award Sought**  *(please tick as appropriate)* | Doctor of Letters (DLitt) ❒ Doctor of Laws (LLD) ❒  Doctor of Science (DSc) ❒ Doctor of Engineering (DEng) ❒ | | |
| **Title of Submission** |  | | |
| I herewith give three months’ notice of my intention to submit for examination for the award stated above:  Sign: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_  **Candidate** | | | |

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| 1. **NOMINATION OF ASSESSORS** *(To be completed by the Executive Dean of Faculty)* | | |
| **Note: Please attach a CV to this form for each Nominee** | | |
| **Assessor (External/Internal)** | **Full Name & Title / Institution Affiliation / Contact Details** | **Comment on reason for particular suitability to the role for this particular submission** |
| 1. **EXTERNAL** |  |  |
| 1. **EXTERNAL** |  |  |
| 1. **INTERNAL** |  |  |
| I herewith assert that the Faculty Review Group has recommended that there is a *prima facie* case for the Higher Doctorate being awarded to the above named Candidate and I recommend the appointment of the above named assessors for this Candidate:  Sign: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_  **Executive Dean of Faculty** | | |

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