

RE-EXAMINATION THESIS ASSESSMENT RECOMMENDATION

Name of candidate:		«Students_Name»			
Degree of study:		PhD	DBA	DClinPsych	EdD
Title of thesis:		"«Thesis_Topic»"			
Name of examiner:		«NZExam_Name»			
	referred to the note mend the following			xt of my accompanyir	ng report, I
	Pass The thesis meets the required standard for the award of the Doctoral degree. Typographical and grammatical changes are permitted, as long as these are of a minor nature and can be completed within a two week timeframe.				
	Fail That the re-submi Doctoral degree.	tted thesis doe	s not meet the	required standard for	the award of the
Signat	ure of examiner:			Date:	
Note:	This recommenda Examiners.	ntion is strictly	confidential to	the Doctoral Researd	ch Committee and