EXAMINATION OF A RESEARCH DEGREE THESIS CERTIFICATE OF CORRECTIONS

This certificate should be completed as follows:

Minor Corrections:	Internal Examiner
Major Corrections:	Internal Examiner External Examiner

Name of Candidate:	Insert Name
ID No:	Insert Number
Programme of Study:	Insert Programme of Study

I/We* confirm that the minor/major* corrections have been carried out to my/our* satisfaction. (*please delete as appropriate)

Name (Block Capitals):	
Signed:	Date:
(Internal Examiner)	

Name (Block Capitals):		
Signed: (External Examiner)	Date:	

If applicable, where a second external examiner has been appointed

Date:

This form to be completed and returned with the corrected thesis by (**insert date**) to: Team Members Name, Position, Academic and Student Administration, The Academic Office, The University of Birmingham, Edgbaston, Birmingham B15 2TT.