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| **EXTERNAL EXAMINER: CHANGE OF ADDRESS, CONTACT DETAILS, OR CIRCUMSTANCES NOTIFICATION** |

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| PLEASE USE THIS FORM TO REPORT A CHANGE OF ADDRESS, CONTACT DETAILS, OR CIRCUMSTANCES OF AN EXTERNAL EXAMINER FOR UNDERGRADUATE OR POSTGRADUATE TAUGHT PROGRAMMES. |

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| **Former Contact Details** | **New Contact Details** |
| Address (inc. postcode): | Address (inc. postcode): |
| Telephone: | Telephone: |
| Email: | Email: |
| Brief details of any change in circumstances (e.g. change of position or institution, new personal or professional relationship with Lancaster University, change of title or name, change in right to work eligibility, etc): |
| **Signature:** |  | **Date:** | Pick. |

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| **Please return this form to:** **externalexaminers@lancaster.ac.uk** |

**Administrative Use Only:**

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| Received by Academic Quality Standards and Conduct Department: | Date: | Pick. |
| External Examiner Master Spreadsheet updated: | Date: | Pick. |
| Forwarded to HR | Date: | Pick. |
| **Signature:** |  | **Date:** | Pick. |