**Annex 1**

**Annex to External Examiner’s Report**

**Review of taught modules**

1. Have you reviewed all the scripts? **Yes** **No**

2. If **No**, please give details of the sample used by filling the table below. This information is required for our records, in case there is a request for review by a student.

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| **Modules** | **ID of Scripts Reviewed** |
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***[Please fill a second sheet if the sample size is greater than 10.]***

**PTO**

***January 2020***

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| **Modules** | **ID of Scripts Reviewed** |
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***[Please fill a second sheet if the sample size is greater than 10.]***

**Signature: ………………………………. Date: ……………………….**

***January 2020***