



AGREEMENT ON EXTERNAL EXAMINATION

Department:	
and external examiner (name):	Personal ID no.:
Address:	
Examiner's place of work:	
Tax card: Yes <input type="checkbox"/> . If no, state tax-deduction percentage: and tax municipality (name):	
Foreign examiners must attach copy of passport.	
Bank account number for payment:	
Teaching period/examination period:	
Censoring/evaluation of following courses/assignments:	
The external examiner hereby declares by his/her signature on this agreement that he/she has carefully read the <i>Guidelines for Internal and External Examiners at UMB</i> , which are found at the following link: http://www.umb.no/statisk/sit_english/guidelines/regs_guidelines_examiners.pdf	
<i>Duty of confidentiality</i> follows the Public Administration Act and the Universities and Colleges Act.	
Compensation in accordance with UMB's fee rates.	
Employer fills out	
UMB's debit account: Account:	Proj.no: Work area: Place code:
Comment/statement:	

Place/date: Ås, for the Norwegian University of Life Sciences

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employer

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employee