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| **Application for Restricted Access of a Research Degree Thesis**  |  |
| This form is to be used to make an application for RESTRICTED ACCESS of a research degree thesis. Please note that applications must be made no later than NOMEX stage.  |
| **STUDENT DETAILS** |
| Surname: | Student Number: |
| First Name: | Title (Mr/Mrs/ Ms etc): |
| Mailing Address: |
| Email: | Phone Number: |
| Thesis Title: |
| Faculty: | Expected Submission Date: |
| **REQUEST (delete as applicable)** |
| Restrict Access: | Allow no-one Access / UoW staff and students only |
| To which part of the thesis does this request refer? | Thesis/ Appendix/ Other work |
| Length of restricted Access | X months |
| **REASONS FOR REQUEST** |
| In accordance with regulation 4.9 governing Research Degrees I am requesting that access to the thesis and/or appendix should be restricted on the following grounds: |
|  |
| **SIGNATURE OF CANDIDATE** |
| Signature: | Date: |
| **DIRECTOR OF STUDIES SUPPORTING REASONS** |
|  |
| Director of Studies Name:Director of Studies Signature: | Date: |
| **OFFICE USE ONLY (delete as applicable)** |
| Approved/ Not approved | Date:  |
| Reasons: |
| Dean of Research Signature: | Date: |