

**STUDENT STATEMENT**  
**Submission of Thesis for Examination**



**UTS: UNIVERSITY GRADUATE SCHOOL**

This statement, together with the relevant number of copies of your temporary bound thesis, should be lodged with the **Responsible Academic Officer (Associate Dean or Director) of Research** in your Faculty.

Student's Name: \_\_\_\_\_ Student No: \_\_\_\_\_

Course: \_\_\_\_\_ Faculty/Institute: \_\_\_\_\_

Thesis Title: \_\_\_\_\_  
\_\_\_\_\_

**Please circle as appropriate and have signed where necessary, to complete the form:**

Have you previously held, or do you currently hold, a scholarship with stipend for this degree? **Yes / No**

I certify that this thesis meets the requirements for theses as set out in UTS Rule 11.2 as appropriate, and UGS Guidelines for Presentation and Submission of Theses for Higher Degrees. **Yes / No**

I certify that the work in this thesis has not previously been submitted for a degree nor has it been submitted as part of requirements for a degree except as fully acknowledged within the text. **Yes / No**

I certify that the thesis has been written by me. Any help that I have received in my research work and the preparation of the thesis itself has been acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis. **Yes / No**

I certify that I have received ethics clearance from the appropriate authorities in accordance with UTS policies on human and animal research. **Yes / No/NA**

I understand that if I am awarded a higher degree, the University shall retain all three bound copies, one of which will be deposited with the University Library and listed in the Library's catalogues. It shall be available immediately for consultation, loan or copying at the discretion of the University Librarian, unless non-disclosure has been approved. (Rule 11.17, 11.18 and 11.19) **Yes / No**

Once the thesis can be released, I give leave to the University to:  
(a) Publish, or to authorise publication, of the abstract from the thesis **Yes / No**

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This thesis contains confidential material, that, under UTS Rule 11.17.4. should have restricted distribution and disclosure, until (date to not normally exceed two years) \_\_\_\_\_ **Yes / No**

**If Yes, please attach a copy of the approved non-disclosure agreement (typically, a signed agreement with an industry partner negotiated through the Research and Innovation Office).**

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Only if restricted distribution and disclosure is requested, the Supervisor and RAO are to sign agreement here:

Supervisor to sign: \_\_\_\_\_ RAO to sign: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# ACKNOWLEDGEMENT OF RECEIPT OF THESIS



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Receipt is acknowledged by the University Graduate School of THREE copies of your doctoral thesis, or TWO copies of your masters thesis, **submitted for examination** for a higher degree by research.

Date Received (for UGS use):

Name: \_\_\_\_\_

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