THE UNIVERSITY of York

EXAMINATIONS OFFICE

RESEARCH THESIS/DISSERTATION SUBMITTED FOR EXAMINATION

Student name:		*Student number:*	
Department:		*Date of submission:*	
PhD, MPhil, EngD or MA/MSc by research		*Viva date (if known):*	
Is this a resubmission?	Yes / No	*Staff Member?*	Yes / No
Submitted by:			

Please provide the address you would like your award outcome letter to be sent to and the date this is valid from. In addition we require a non-University email address for the graduation information to be sent to following your award.

Date address valid from:	*Address for award letter:*
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I have read and understand the University's regulations concerning academic misconduct, including plagiarism and collusion, as contained in the University's Ordinances and Regulations (Regulation 5.4)	
Signature:	*Date:*

NOTE TO CANDIDATES: Following the oral examination and completion of any revisions required by the examiners, the award for your degree will not be confirmed until copies of your research thesis/dissertation have been deposited in accordance with Regulation 2.8.4. Printed copies should be deposited with the Examinations Office, Student Administration Building, University of York, York, YO10 5DD.

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RESEARCH THESIS/DISSERTATION RECEIPT

Name:
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