



Graduate Research School

Application for Restricted Access and/or Confidential Examination

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This form is to be used to make application for RESTRICTED ACCESS of your research higher degree thesis or for CONFIDENTIAL EXAMINATION or for both. Please note that applications must be made well in advance of submission of a thesis for examination. Candidates must refer to the information overleaf before completing the form. *This form should be forwarded to the Graduate Research and Scholarships Office, Hackett Hall, (M358).*

STUDENT DETAILS

Surname:	Student ID:
Given names:	Title (Dr/Mr/Mrs/Ms etc):
Mailing Address:	
Is this a permanent change? If not, please indicate time during which mail should be directed here Postcode:	
School:	Scholarship:
Name of Degree:	Expected Submission Date:

REQUEST (please tick one or more as appropriate)

<input type="checkbox"/> Restrict Access	<input type="checkbox"/> Allow no-one access (see Θ)	For ____ months
	OR	
<i>For digital theses only:</i>	<input type="checkbox"/> Allow UWA staff & students only (see Θ + δ)	For ____ months
<input type="checkbox"/> Confidential Examination (see Δ)		

To what does this request refer?	<input type="checkbox"/> Thesis	<input type="checkbox"/> Appendix	<input type="checkbox"/> Other work
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REASONS FOR REQUEST (please tick as appropriate)

In accordance with a letter received from the Legal Services Office, I am advising the Graduate Research and Scholarships Office that my thesis contains confidential information which should be withheld and/or it is necessary for access to my thesis, work or appendix be restricted. In accordance with Regulation 22 governing Research Higher Degrees I am requesting that the Board of the Graduate Research School consider this application.

I have recently become aware that my thesis, appendix or other work should be kept confidential and/or access to my thesis appendix or other work should be restricted. **I have not previously informed the University of the need for special arrangements regarding the examination and access to my thesis.** My reasons are as follows (*please tick as appropriate*)

- My thesis, appendix or other work contains confidential material.
- Confidentiality and/or restricted access was a condition imposed by the owner of private records and material used by me.
- I was in an employment or other contract relationship with a third party that made the restriction a condition of the contract. *Please attach copies of agreements.*
- Other :

In accordance with Regulation 22 governing Research Higher Degrees I am requesting that the Board of the Graduate Research School consider this application.

For digital theses only: I am concerned that my work not be considered to be "previously published".

Signature of Candidate

Signature of Candidate:

Date

SUPERVISOR AND HEAD OF SCHOOL APPROVAL AND SUPPORTING REASONS

To be completed by supervisor – please comment on the reasons for this request, indicating approval or otherwise. (Please note points below)

Supervisor(s) Signature: _____ Date: _____

Supervisors(s) Name: (please print): _____

Head of School Signature: _____ Date: _____

Head of School(s) Name: (please print): _____

NOTES

⊖ Restricted Access: Upon written application by a candidate or by an interested party prior to the lodgement of a thesis or other work, the Board of the Graduate Research School may, after consultation with the candidate, the Chair of the Intellectual Property Committee and others where appropriate restrict access to a thesis, other work or an appendix to a thesis for a period of time not normally exceeding two years from the date that it is classified as Passed. A thesis, work or appendix will normally only be restricted if it contains confidential material, or if it was a condition imposed by the owner of private records and material used by the candidate, or if the candidate was in an employment or other contract relationship with a third party that made the restriction a condition of the contract.

⚡ Access to Theses made available via the UWA Digital Thesis Repository may be limited to UWA staff and students only.

⚠ Confidential Examination: Examiners will be sent a non disclosure statement to sign and return. Examiners are required to state that they acknowledge the confidential nature of the information in the thesis, work or appendix, and undertake not to disclose or discuss any of the information contained therein without the written permission of the author and the University for a period of twelve months from the date on which an examiner received the thesis, work or appendix for examination.

Office Use Only

<input type="checkbox"/> Approved	_____	_____
<input type="checkbox"/> Not Approved	_____	_____
	Dean, Graduate Research School	Date
Actioned By:		
<i>(insert name of authorising officer)</i>		Date:
HIDEGS updated	<input type="checkbox"/>	Date:
Library Advised	<input type="checkbox"/>	Date: