

## Request Form for Embargo or Exemption of Thesis/FYP in DR-NTU

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School:		
Thesis/FYP Title:		
Select Degree: <input type="checkbox"/> PhD <input type="checkbox"/> Master by Research <input type="checkbox"/> Master by Coursework <input type="checkbox"/> Bachelor <input type="checkbox"/> Others: _____		
<b>Which request are you making? Choose one and fill in the section accordingly</b>		
<input type="checkbox"/> <b>Embargo Request</b> <i>Authors can delay the sharing of their works by specifying an embargo period.</i>  <b>Select an embargo/extension period:</b> <input type="checkbox"/> 6 months <input type="checkbox"/> 1 year <input type="checkbox"/> 2 years  <b>Select the reason(s):</b> <input type="checkbox"/> The work is pending publication <input type="checkbox"/> The work is pending IP (e.g. patent) application <input type="checkbox"/> To satisfy publisher's embargo requirements <input type="checkbox"/> Obligations to third parties <input type="checkbox"/> Others (please specify): _____  <u><b>Exclusion of Liability (applicable if an Embargo Request is made)</b></u> By submitting this form to apply for an Embargo Request, I, the Student whose name and signature is indicated at the bottom of this form, agree that the University (including the Library) shall not be liable for any loss or damage connected with the submission, storage or making available of the work on DR-NTU, or for any loss or damage arising from any use of data or information contained in DR-NTU by any person.	<input type="checkbox"/> <b>Exemption Request</b> <i>Authors do not need to deposit their works into DR-NTU. (PhD/Master by Research students should still deposit the non-sensitive metadata and abstract, where possible)</i>  <b>Select the reason(s):</b> <input type="checkbox"/> The work contains personally identifiable information despite attempts to anonymise or remove personal data. <input type="checkbox"/> The work contains sensitive or confidential information related to national security. <input type="checkbox"/> The work contains data protected by intellectual property rights. <input type="checkbox"/> Obligations to third parties. <input type="checkbox"/> Others (please specify): _____	
_____ Student's Name	_____ Student's Signature	_____ Date (DD/MM/YYYY)
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