



# THESIS PUBLICATION POSTPONEMENT REQUEST

Application is hereby made that digital access to the thesis/ project / essay named below be postponed under the terms set out in [Graduate General Regulation 1.11.3](#).

Please complete the following form and email it to [defence@sfu.ca](mailto:defence@sfu.ca) at least 30 days before the defence date. If approved, this form needs to be included in your submission to the library thesis registration system and “Postponement being requested” must be selected to “yes.” If these steps are not followed, your thesis will be published and accessible online.

**Please note:** Once a postponement has been submitted and uploaded to the thesis registration system, the thesis will not be made public until 1 year after the defence date. Requests for earlier publication will not be granted. If an additional postponement is needed, a request for an extension is required.

## STUDENT INFORMATION

|                       |                                |
|-----------------------|--------------------------------|
| <b>Student number</b> | <b>Email</b>                   |
| <b>First name</b>     | <b>Surname</b>                 |
| <b>Academic unit</b>  | <b>Alternate contact email</b> |

## CAPSTONE INFORMATION

|   |
|---|
| <b>Title of thesis / research project / essay</b> |
|---|

|   |
|---|
| <b>Date of thesis defence / project or essay approval</b> |
|---|

|   |
|---|
| <b>Reasons for postponement request. Please provide additional information or attachments if desired.</b> |
|---|

|  |
|--|
| <input type="checkbox"/> I hereby acknowledge the terms and conditions of <a href="#">Graduate General Regulation 1.11.3</a> . |
|--|

|                            |                        |
|----------------------------|------------------------|
| <b>Student’s signature</b> | <b>Date of request</b> |
|----------------------------|------------------------|

|                                      |                  |             |
|--------------------------------------|------------------|-------------|
| <b>Supervisor name</b>               | <b>Signature</b> | <b>Date</b> |
| <b>Co-Supervisor (if applicable)</b> | <b>Signature</b> | <b>Date</b> |

## APPROVAL

|                         |             |
|-------------------------|-------------|
| <b>Graduate Studies</b> | <b>Date</b> |
|-------------------------|-------------|

### Freedom of Information and Protection of Privacy

The information on this form is collected under the authority of the University Act (R.S.B.C. 1996, c.468). It is related directly to your ability to register in a graduate program and is needed by the University to verify that you completed a degree but are unable to access your official certificate and/or transcript. The information will be used to update your student record. If you have any questions about the collection and use of this information, please contact Graduate Studies at (778) 782-3042 or by email to [gradstidy@sfu.ca](mailto:gradstidy@sfu.ca)