|  |  |
| --- | --- |
| þÿ | **RESEARCH DEGREE EXAMINATION ENTRY FORM** |

Sections A and B should be completed before returning this form to the FMS Graduate School at [fmspgr-exams@newcastle.ac.uk](mailto:fmspgr-exams@newcastle.ac.uk) along with 1 electronic copy of your thesis.

|  |  |
| --- | --- |
| **SECTION A – To be completed by CANDIDATE** | |
| Name of Student: | Student Number: |
| Name of Supervisor(s): | School / Institute: |
| Programme: | Stage: |
| Address to which communications should be sent after completion of the examination (please include an email address): | |
| Exact Title of Thesis as approved by the Dean of Postgraduate Studies: | |
| Word Count: | |
| Declarations:   1. I declare that this thesis is my own work and that I have correctly acknowledged the work of others. This submission is in accordance with University and Academic Unit guidance on good academic conduct. 2. I certify that no part of the material offered has been previously submitted by me for a degree or other qualification in this or any other University. 3. I confirm that the word length is within the prescribed range as advised by my Academic Unit and Faculty. 4. Does the thesis contain collaborative work or the academic contribution of other authors, whether published or not? **Yes / No**   *(If* ***Yes****, please indicate what proportion of the work is your independent contribution on a separate sheet or provide an Academic Contribution Statement for each paper/publication (please refer to template on page 3).* ***Please note that this information should also be provided as a declaration in your thesis.***  **If your thesis has been impacted by the Covid-19 situation, please refer to the Covid-19 Impact Statement Guidance available** [**here**](https://www.ncl.ac.uk/mediav8/student-progress/files/Final%20C19%20Impact%20Statement%20Guidance%20-%20September2023.pdf?_gl=1*bs4u9m*_up*MQ..*_ga*NzYzMjk5NTY2LjE3Mzc5ODc0NjU.*_ga_VH2F6S16XP*MTczNzk4NzQ2NS4xLjEuMTczNzk4NzQ3MC4wLjAuMTk0MjAxNzQzMQ..)**.** | |

|  |  |
| --- | --- |
| **Signature *(student)*:** | **Date:** |

|  |  |  |
| --- | --- | --- |
| **SECTION B – To be completed by SUPERVISOR** | | |
| Should the final submitted thesis be subject to an Extended Restriction beyond the standard 6 months? | | **Yes / No** |
| I certify that the above-named candidate has satisfactorily completed and complied with the required terms of the research degree programme in accordance with the University’s guidelines for Academic Conduct and Regulations for the Degree. | | |
| Name and Signature of Supervisor(s): | Date: | |

**ACADEMIC CONTRIBUTION STATEMENT**

**Please provide one declaration per paper/publication**

TITLE OF PAPER/PUBLICATION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DETAILS OF YOUR CONTRIBUTION TO THIS WORK (%)

* Design of investigation              \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Conduct of research                    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Analysis of outcome                    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Preparation for publication       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* TOTAL                           \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(To be an average of, or at least*

*consistent with, the above figures)*