**INTENTION TO SUBMIT FORM**

*To be completed* ***two months*** *before student’s intended submission date – formal appointment of examiners cannot take place until this form has been received by the Assessment & Examinations PGR team.*

Please note, if you are in receipt of a United States Federal Direct Loan, this request may have an impact on your funds. Please seek advice from the US Financial Aid Office before proceeding (usfinancialaid@sussex.ac.uk)

**SECTION A – To be completed by the candidate**

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name | : | Reg. No. | : |
| Address | :This **must not** be a pigeonhole address. This address will be used for all future correspondence relating to the examination and graduation processes (please inform the Assessment & Examinations PGR teamof any subsequent change of address). |
| Email Address | : | Intended Date of Submission | : |
| Degree Programme | : | School | : |
| Title of Thesis | : |

I certify that:

*(Tick as appropriate)*

|  |
| --- |
|[ ]  The thesis does not exceed the permitted word length (see handbook: <http://www.sussex.ac.uk/rsao/regulations/>) |
|[ ]  The thesis does exceed the permitted word length, and I have attached written approval for this from the Director of Doctoral Studies (see handbook: <http://www.sussex.ac.uk/rsao/regulations/>) |
|[ ]  I attach a typed summary of the thesis  |

I understand that the assessment of my thesis will be undertaken by the duly appointed examiners, and I accept that the approval of my application for entry to the research degree examination does not imply or constitute any judgement as to the academic standard of the thesis by any signatories to this application form.

|  |  |
| --- | --- |
| Please check one box:(please note if a box is not checked, this request cannot be approved) | [ ]  I am in receipt of, or have been in receipt of, a Federal Direct Loan during my PhD/MPhil[ ]  I **am not** in receipt of, and have not been in receipt of a Federal Direct Loan during my PhD/MPhil |
| Please check one box: | Do you have a disability?[ ]  Yes [ ]  No If you have answered yes, we will contact you to enquire if you wish to work with the Student Support Unit to produce suitable recommendations for your viva. |

|  |  |  |  |
| --- | --- | --- | --- |
| Signed |  | Date | : |

 *(Student)*

**SECTION B – To be completed by the main supervisor**I certify that:

*(Tick as appropriate)*

|  |  |
| --- | --- |
| 1. [ ]
 | The title and attached summary are consistent with the previously approved research topic; |
|[ ]  The details provided by the student in Section A are correct |

If you are unable to certify any of (1) and (2) above, please explain the reason below:

|  |
| --- |
| : |

|  |  |  |  |
| --- | --- | --- | --- |
| Signed |  | Date | : |
| **Please Print Name** | : |

**Once completed, please return this form, along with a copy of the summary (or abstract) to the Assessment & Examinations PGR team:** **researchexams@sussex.ac.uk**.