

# SCHOOL OF Graduate Studies and Postdoctoral Affairs



## THESIS PAPER COPY SUBMISSION FORM

The personal information on the form is collected under the authority of the *Royal Charter of 1841*, as amended. The information will be used to collect your mailing address for delivery of your bound thesis copy.

STUDENT NAME:		<table border="1"> <thead> <tr> <th colspan="2">FOR SGS OFFICE USE ONLY</th> </tr> </thead> <tbody> <tr> <td></td> <td># of copies submitted</td> </tr> <tr> <td></td> <td>Surcharge Received</td> </tr> <tr> <td></td> <td>Restricted Thesis</td> </tr> <tr> <td></td> <td>Designated Thesis</td> </tr> <tr> <td>Date:</td> <td></td> </tr> </tbody> </table>	FOR SGS OFFICE USE ONLY			# of copies submitted		Surcharge Received		Restricted Thesis		Designated Thesis	Date:	
FOR SGS OFFICE USE ONLY														
	# of copies submitted													
	Surcharge Received													
	Restricted Thesis													
	Designated Thesis													
Date:														
DEPARTMENT:														
DEGREE:														
STUDENT#:														
E-MAIL:														
SUPERVISOR(S):														

Is the thesis RESTRICTED from publication:	YES?		NO?	
--	------	--	-----	--

SHIPPING INFORMATION for your thesis copy (~ eight weeks):			
Address:			
City:		Province/State:	
Postal Code:		Country:	

Can you pick up your thesis? If yes, please provide phone#:	
---	--

**Please note: You are responsible for checking each copy submitted for binding.** If any errors are discovered in any of the bound copies (i.e. pages out of order, etc.) and you wish to submit corrected versions for binding, you will be charged the current binding fee.

Student Signature:	
--------------------	--

FOR SGS OFFICE USE ONLY	
DATE:	
MAILED OUT:	
PICKED UP BY STUDENT:	