

# GS14: CHANGE IN THESIS TITLE 2023-2026

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| --- |
| **All personal information gathered will be processed in accordance with TUS privacy statements****Section A to be completed by the Research Student** **Section B to be completed by the Principal Supervisor****Section C to be completed by the Chairperson of the Faculty Research Committee.** |

**SECTION A: To be completed by the Research Student**

**Research Student and Programme Details:**

|  |  |
| --- | --- |
| Research Student Name |  |
| Research Student Number |  |
| Programme Code and Title |  |
| Department and Faculty |  |
| Research Institute/Centre/Group |  |
| Principal Supervisor |  |
| Programme Start Date (date, month, year) |  |

**Proposed Change:**

|  |  |
| --- | --- |
| Original Thesis Title |  |
| Proposed Thesis Title |  |
| **Please provide the main reason for this proposed change (please tick where applicable)** |
| The new title better reflects the aims and objectives of the research as it has evolved |[ ]
| Examiner(s) or supervisor(s) recommendation |[ ]
| Other |[ ]
| If other, please give details (maximum 200 words) |

Research Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION B: To be completed by the Principal Supervisor**

**Have you discussed the proposed change of thesis title with the student?**

|  |  |
| --- | --- |
| **Yes** [ ]  | **No** [ ]  |

**If you answered no, please give details briefly:**

|  |
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|  |

Principal Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION C: To be completed by the Chairperson of the Faculty Research Committee**

**Is this application approved by the Faculty Research Committee?**

|  |  |
| --- | --- |
| **Yes** [ ]  | **No** [ ]  |

**If no, please give details:**

|  |
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|  |

Signature of Chairperson of Faculty Research Committee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Dean of Graduate Studies\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_