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| **Embargo Notification Form** |

**To be completed by Faculty/Centre Supervisor/Student and sent to** [**rmo@lincoln.ac.nz**](mailto:rmo@lincoln.ac.nz)and[**Deposit@lincoln.ac.nz**](mailto:Deposit@lincoln.ac.nz)

**Student and document details:**

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| --- | --- | --- | --- | --- |
| **Student ID** |  | | Date of request |  |
| **Student name** | First name: |  | Family name: |  |
| **Scholarship document type** | Thesis – Doctoral (PhD)  Thesis – Masters  Dissertation | | | |
| **Scholarship document title** |  | | | |

**Supervisor details:**

|  |  |
| --- | --- |
| **Supervisor name** |  |
| **Faculty** |  |

**Embargo Instructions:**

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| **Grounds for Embargo**  ***(tick applicable reason)*** | **Refer to Lincoln University ‘Grounds for Embargo Guidelines’**  **Commercially sensitive information**  **Intellectual Property protection required**  **Academic publication**  **Copyright**  **Privacy** |
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Applications for any changes to the embargo period, please contact [**Deposit@lincoln.ac.nz**](mailto:Deposit@lincoln.ac.nz)

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| *Student* |  | *Signature* |  | *Date* |

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| *Supervisor* |  | *Signature* |  | *Date* |