# Request Form for Embargo or Exemption of Thesis/FYP in DR-NTU

| Full Name |  | Matric Number |  |
|-----------|-------------------------------|-----------------|
| School |  |  |  |
| Report/Project Title |  |  |  |

**Degree**

- [ ] PhD
- [ ] Master by Research
- [ ] Master by Coursework
- [ ] Bachelor

Others: ____________________________

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**Click one option below and then fill in the portion accordingly**

- [ ] Embargo Request
- [ ] Exemption Request

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### Embargo Request

**Select an embargo period:**

- [ ] 6 months
- [ ] 1 year
- [ ] 2 years
- [ ] Others: ___________

**Select the reason:**

- [ ] The work is pending publication
- [ ] The work is pending patent application
- [ ] To satisfy publisher’s embargo requirements
- [ ] Obligations to third parties
- [ ] Others (please specify):
  
  ____________________________________________

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**Exclusion of Liability (applicable if an Embargo Request is made)**

By submitting this form to apply for an Embargo Request, I, the Student whose name and signature is indicated at the bottom of this form, agree that the University (including the Library) shall not be liable for any loss or damage connected with the submission, storage or making available of the work on DR-NTU, or for any loss or damage arising from any use of data or information contained in DR-NTU by any person.

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### Exemption Request

**Select the reason:**

- [ ] The work contains personally identifiable information despite attempts to anonymize or remove personal data.
- [ ] The work contains sensitive or confidential information related to national security.
- [ ] The work contains data protected by intellectual property rights.
- [ ] Publishers do not allow self-archiving.
- [ ] Obligations to third parties.
- [ ] Others (please specify):

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<table>
<thead>
<tr>
<th>Student’s Name</th>
<th>Student’s Signature</th>
<th>Date (YYYY/MM/DD)</th>
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<tbody>
<tr>
<td>Supervisor’s Name</td>
<td>Supervisor’s Signature</td>
<td>Date (YYYY/MM/DD)</td>
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