



RHODES UNIVERSITY
Grahamstown • 6140 • South Africa

Declaration Form

To be completed by ALL students submitting a thesis. Please type or write clearly in BLOCK LETTERS.

Declaration submitted by a candidate presenting a thesis for examination.

Information

Student Name: _____
First Name *Middle name/s or Initial* *Surname*

Student Number: _____

Title of thesis: _____

The thesis which I now submit for the degree of: _____

* (a) has been published / accepted for publication in

(quote full name of the publication(s): use a separate sheet if necessary)

Volume: _____ Part: _____ Year: _____

OR

* (b) is not being published and I hereby grant to Rhodes University permission to make additional copies of it, in whole or in part, for the purposes of research.

* Delete (cross out) whichever does not apply

I certify that this thesis has not been submitted for a degree in any other university and that it is my original work except as follows: _____

SIGNATURE OF STUDENT: _____ **DATE:** _____