Research Degrees

**Certification of Thesis**

The candidate should complete Part A of this form and ensure that their supervisor completes Part B, including the signature. The candidate should send the completed form to the Research Director.

**PART A**

Candidate Name:

Thesis Title:

Date of Submission:

**PART B**

I certify that this thesis meets SCD requirements for submission for examination as indicated in Sections A.10, A.11 and A.12 of the Research Degrees Regulations and in respect of the required length of the thesis.

Primary Supervisor Name:

Signature:

Date: