University at Buffalo
The Graduate School

# Request for Embargo (Delayed Release) of Thesis or Dissertation

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Last Name _____ First Name _____

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Major Advisor _____ Major Advisor Email _____

Thesis or Dissertation Title

Delay Period Requested: 12 Months ☐ 24 Months ☐

Reason for Embargo (delayed release) of Thesis or Dissertation:

☐ To allow time for evaluation of potentially patentable technology by the university.

☐ Pursuant to a UB contractual obligation, to grant an external research sponsor time to conduct prepublication review in order to identify the sponsor's proprietary information or potentially patentable inventions.

☐ To allow time for consideration by outside press for potential academic or commercial publication.

☐ Other: _____

**Student Oath:** With my signature below, I affirm my understanding that if my embargo request is approved, the abstract and citation of my work will be available to the public via UBIR and ProQuest approximately one month after my conferral date while the full-text will not be released until the embargo expiration date.

**Required Approvals**

Student _____
Print Name Signature Date

Major Advisor _____
Print Name Signature Date

Chair/Director of Grad. Studies _____
Print Name Signature Date

**Submit completed form to the Graduate School at grad@buffalo.edu.**

**For Graduate School Use Only**

Reviewer: _____ Approved _____ Denied _____

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