



Faculty of Medicine, Dentistry & Health Sciences
Melbourne Dental School



DCD Minor Thesis Submission Form

THESIS SUBMISSION FORM

When the draft copies are ready to go out for examination, the student and the course convener must complete the thesis submission form (sample below) and deliver it along with the two draft copies (spiral binding) to the Postgraduate Programs Officer, Level 4, MDS.

THE UNIVERSITY OF MELBOURNE – MELBOURNE DENTAL SCHOOL
THESIS SUBMISSION FORM – Doctor of Clinical Dentistry

This form must be completed and accompany the two copies of the draft thesis that are submitted to the Postgraduate Administrator for examination. The thesis will not be accepted for examination without this form.

DHEAG No. _____ refer p. _____ of the thesis.

SECTION A – Statement by Student

It is your responsibility to arrange for the completion of this form. Please ensure your course convener has approved the draft thesis for examination by completing Section B below.

Student No. _____

Family Name _____

Given Name(s) _____

Thesis title reproduced from the title page of the thesis:

This draft thesis is submitted for examination to satisfy the thesis requirements for the Doctor of Clinical Dentistry.

I certify that I have complied with the following requirements (please tick ✓):

- I have completed all formal enrolment procedures for the current semester.
- The thesis is the recommended length of approximately 25,000 words (excluding tables, figures, appendices and bibliography).
- The thesis comprises only my original work, except where due acknowledgement has been made in the text to all other material used.



The thesis reflects work done during the period of candidature but may include related preliminary material provided that it has not contributed to an award of a previous degree or diploma.

The thesis complies with the University of Melbourne Code of Conduct for Research <http://www.unimelb.edu.au/Statutes/r171r8.html>

Research data and records collected, used and maintained in the conduct of my research will be retained in the relevant Unit and will be accessible for five years from the date of thesis submission unless publication, or public release of the work or research subsequently occurs, in which case the research data and records will then be retained for five years after publication, or public release.

Student's Signature: _____ Date: ____/____/____

SECTION B – Statement by the course convener

You are required to sign this form to indicate that you have seen the student's draft thesis and that, to the best of your knowledge, the presentation of the thesis complies with the University/School requirements. It is noted, however, that final responsibility for making the necessary corrections rests with the student prior to submitting the thesis for examination.

If the presentation does not comply with School's requirements, you must indicate below that the thesis does not comply and inform the student, in writing, as to the reasons.

I hereby state that I have seen the draft thesis to be submitted for examination and that:

a) The form of presentation of the draft thesis:

- complies with School's requirements for submission of a DCD thesis
 does not comply (see note above).

I certify that:

the work embodied in the draft thesis is to the best of my knowledge the original work of the student, except where otherwise acknowledged.

- research data and records collected, used and maintained in the conduct of research will be retained in the relevant Unit and accessible for five years from the point of thesis submission unless publication, or public release of the work or research subsequently occurs, in which case the research data and records will then be retained for five years after publication, or public release.

c) The draft thesis

- is prima facie ready for examination or
 has significant shortcomings but may proceed to examination* or
 should not be sent out for examination*.

*If you have chosen either of the last two options, please attach a letter to this "Submission Form" explaining your reasons for doing so.

Is any part of the thesis confidential?

- Yes No

Course Convenor

Prof/AProf/Dr/Mr/Ms: _____ Unit: _____

Signature: _____ Date: ____/____/____

SECTION C - For completion by the Postgraduate Administrator

I certify that I have received two copies of the student's thesis.

Draft thesis is submitted for initial examination. Draft thesis has been rewritten and resubmitted for examination.

Signature: _____ Date: ____/____/____

Enrolment records (ISIS) updated by: _____ Date: ____/____/____



CONFIDENTIALITY AGREEMENT

If your research contains any elements that your course convener or supervisors wish to remain confidential, a confidentiality agreement (see below) is sent to the examiner to sign prior to receiving the thesis.

Dear Examiner,

STUDENT'S NAME – DCD Minor Thesis Examination

It has been brought to our attention that the above candidate's thesis contains confidential information that should not be released publicly without first obtaining clearance from the University. To ensure that the material in this thesis remains confidential, the University would like you as an examiner of the thesis to make the following undertaking prior to commencement of your review of the thesis:

- (a) you acknowledge that the thesis is disclosed to you solely to enable examination of the thesis; and
- (b) you agree to treat as confidential all information in the thesis (except for information which you can establish is in the public domain) and not to disclose or divulge any part of the thesis to any third party without the written approval of the University.

If the above mentioned is acceptable to you I would be grateful if you would kindly sign this letter indicating your agreement to examine the thesis on the above basis. It would be appreciated if you would send a signed copy to our office by either fax on +61 3 9341 1599 or email to dental-office@unimelb.edu.au as soon as possible.

Should you need further information please contact me at the above email address or ph. +61 3 9341 1507.

Yours sincerely,

(Academic Program Offer)

Melbourne Dental School Academic Programs Officer

I agree to the examination of the thesis on the above basis:

Examiner's signature

Dated



MAKING CHANGES & PREPARATION OF FINAL COPIES

You will receive the following emails from the Postgraduate Administrator when the examiners' reports are returned:

a. First examiner's report

Dear Student,

Please find attached the first examiner's report for your DCD thesis. The identity of the examiner is to remain confidential until you have submitted the final bound copies of your thesis to the School.

Please consult with your course convener to discuss the changes requested by the examiner. As soon as the report is available from the second examiner, a copy will be forwarded to you along with thesis formatting guidelines.

The examiner has returned the draft copy of your thesis.

b. Second examiner's report

Dear Student,

Please find attached the second examiner's report for your DCD thesis. The identity of the examiners is to remain confidential until you have submitted the final bound copies of your thesis to the School.

The second examiner recommended your thesis be accepted without further examination, but subject to making the changes as specified in the examiner's report (attached), to the satisfaction of the Chair of Examiners, Professor David Manton.

Please consult with your course convener regarding this outcome.

The draft copy of the thesis has been returned by the examiner.

Before you arrange to have your thesis permanently bound, please submit the following to Professor Manton for final approval:

- *the revised (second) draft (that now contains any changes from both examiners)*
- *a written explanation of the changes made with reference to examiner 1 and examiner 2*
- *and a copy of the first draft submitted for examination*

Guidelines for formatting the final permanently bound copies of your thesis are attached. Please ensure you follow these with due consideration to any particular specialty formatting preferences. Your course convener will be able to guide you further here.

Having received approval to prepare the permanently bound copies of your thesis from the Chair of Examiners, please arrange for this to be done according to the attached guidelines and send the copies to me. When these have been received and your course convener has confirmed course completion, you will receive a letter verifying the specialty you have studied and the completion of all course requirements. This will be needed for registration purposes. You will be contacted by Student Administration regarding graduation.

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