

Student Signature

## **Electronic Dissertations Request for Delay of Posting**

	Student Information		Degree Program	
First Name		Last Name		Middle Name
Street Add	dress			
Street Add	dress (continued)			
City		State		Zip Code
Daytime Phone Number		Email Address		
De	lay Information			
Title of Dis	ssertation			
Advisor Printed Name		<u> </u>	Advisor Signature	
7.001301 1	nined Name		Advisor digitature	
Desired Delay Start Date			Desired Delay End Date (up to three years after start date)	
Reason fo	or Delay:			
	☐ Patent Pending	Signature	of KSU Patent Officer (PEOUE	PED)
	☐ Publisher Restrictions	Signature of KSU Patent Officer (REQUIRED)  Policy of each journal must be attached, or you may provide the URL.		
	Journal URL			
	Journal URL			
	Journal URL			
	Other (please explain):			