



TE KARETI IRIRI O CAREY  
**CAREY**  
BAPTIST COLLEGE

# THESIS SUBMISSION FORM

Please return this form to the Academic Registrar, [registrar@carey.ac.nz](mailto:registrar@carey.ac.nz) | 0721

Please ensure you have carefully read and adhered to the Academic Regulations and Thesis Guidelines prior to submitting your thesis.

Please submit this form, along with your research essay, by the due date to the Academic Registrar, [registrar@carey.ac.nz](mailto:registrar@carey.ac.nz).

## SECTION ONE | STUDENT TO COMPLETE

Student name

Student ID number

Course number *(indicate)*

MA901 Thesis (90 credit, 30,000 words)

MA902 Thesis (120 credit, 40,000 words)

Enrolment status *(indicate)*

Full-time

Part-time

Primary supervisor

Secondary supervisor (if applicable)

Title of thesis

Word count

Due date

Date submitted

day

month

year

day

month

year

EMBARGO: If you wish to embargo the thesis, please state the reasons and number of years here:

### Student declaration

I certify that I have completed this thesis in accordance with the rules and regulations of Carey Baptist College. I declare that to the best of my knowledge, no part of this thesis/research essay has been copied from any other student's work or from any other source, except where due acknowledgement is made in the text. I also declare that this thesis essay is my own work and that no other person has written any part of the thesis for me.

### Signature of student

signature

day

month

year

## SECTION TWO | PRIMARY SUPERVISOR TO COMPLETE

### Supervisor declaration

I confirm that I am aware that this thesis is being submitted for examination, and that the above details are correct.

I certify that the candidate has pursued their course in accordance with the rules and regulations of Carey Baptist College.

### Signature of supervisor

signature

day

month

year

SECTION TWO | EXAMINER TO COMPLETE

This is the coversheet to accompany your Examiners Report which should be submitted as a separate document. Please **do not identify yourself on your Examiners Report**.

Record your recommended grade on this cover sheet (below) but **do not state the grade awarded within your Examiner’s Report**, as the grade will be provisional pending confirmation by Academic Committee.

RECOMMENDED GRADE

- Distinction: **A+** Exceptional    **A** Excellent    **A-** Superior
- Merit: **B+** Very Good
- Pass: **B** Good    **B-** Competent    **C+** Satisfactory    **C** Acceptable    **C-** Marginal
- D** Marginal Fail (can resubmit)    **E** Fail (no resubmission)

Recommendation *(please select one)*

- ☐ That the thesis be passed with the recommended grade.
- ☐ That the thesis be passed with the recommended grade provided that the editorial corrections in the Examiners’ Reports are completed to the satisfaction of the student’s supervisor.
- ☐ That the thesis NOT be passed but the student be given opportunity for the thesis to be rewritten and resubmitted for examination on a pass/fail basis.
- ☐ That the thesis be failed with no opportunity for resubmission.

☐ Please tick this box if you do not wish your identity as examiner to be revealed to the student at the conclusion of the examination process.

Signature of examiner

Examiner name

signature

daymonthyear