

Date:

## The Graduate and Professional School Sam Houston State University

A Member of the Texas State University System

Email: TheGraduateSchool@shsu.edu Phone: (936) 294-2408

Main Campus: Templeton Building

\*\*Permanent Embargo Approval\*\*

## **Embargo Request Form**

PLEASE COMPLETE THIS FORM IN ITS ENTIRETY AND EMAIL TO THE GRADUATE AND PROFESSIONAL SCHOOL. Note: Your embargo request must meet certain criteria to be approved by the Dean of the Graduate and Professional School. If you are unsure if your thesis/dissertation meets this criteria, refer to The Graduate and Professional School web page.

SAM ID#:	Expected Graduation:				
First Name: Middle Name or Initial:					
Last Name:		Emai	11:		
	Co	ollege and Program Inform	nation		
Thesis	Dissertation	on Thesis/Dissertation Chair:			
College:		Thesis/Dissertation Chair Email:			
Department:					
	ng submitted by an SHS ail and signature below	SU faculty member on beh	alf of the stude	nt named above, provide	
		Signature:			
Thesis/ Dissertation Title:					
Embargo Type:					
Reason:					
Is your thesis or disse are seeking a patent	ertation grant-funded, consi	idered a creative work or	Yes	No	
	G	RADUATE SCHOOL USE O	NLY:		
Embargo Request Sta	atus: Approve	ed By:			
Approved	Approved Denied		n Specialist	Dean of the Graduate School	