Pre-Submission Interview Form:

This form should be completed and submitted to the Doctoral School (doctoralschool@royalholloway.ac.uk) after the meeting has taken place.

 **Part 1: Enrolment Details:**

|  |  |
| --- | --- |
| Student Name and ID |  |
| School and Department: |  |
| Date of Initial Enrolment: |  |
| Date of Pre-Submission Interview  |  |
| Expected Submission Date: |  |

**Part 2: Project Details:**

|  |
| --- |
| **Working Thesis Title:** |
| **Description of Thesis:** |

**Part 3: Student Comments**

|  |
| --- |
| *Please use this space for any comments you wish to make on the meeting. If you have no comments you wish to make, please indicate this.* |

Student Signature\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part 4: Director of Postgraduate Education Comments:**

|  |
| --- |
| *Please use this space to provide any comments you wish to make in the wake of the meeting.* |

DPE Signature\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Please note that we cannot accept solely typed signatures, if someone is unable to sign the form physically/electronically they will need to email their approval of the document to the Doctoral School (Doctoralschool@royalholloway.ac.uk)