

**Thesis Page Substitution Request**  
Institute Archives and Special Collections  
Massachusetts Institute of Technology

**Instructions**

Students and supervisors should vet thesis content carefully before submission to avoid the need for changes after delivery to the Archives. On occasion, however, classified, proprietary, or confidential information is discovered after delivery and must be removed.

Use the following form to request permission to substitute pages in your thesis for the purpose of excising such content. The form is a fillable PDF.

**Procedure for submission and approval**

**1. Author:**

- a. prints this page
- b. completes page substitution form (next page) – including a list of page(s) to be substituted and reason(s) why
- c. prints a copy of the completed form
- d. signs the form
- e. submits both pages to his/her thesis supervisor or department chair

**2. Thesis supervisor or department/program chair:**

- a. signals approval by signing the form
- b. forwards both pages to the Dean for Graduate Education (Room 3-138)

**3. Dean for Graduate Education:**

- a. signals approval by signing the form
- b. forwards both to the Thesis Coordinator (Room 14N-118)

**4. Thesis Coordinator, Institute Archives:**

- a. contacts student to arrange for delivery of pages to be substituted
- b. arranges for substitution of pages in all copies of the thesis held by the Libraries
- c. notifies author, supervisor or chair, and Dean for Graduate Education when substitution is complete

**Questions?** Please contact Thesis Coordinator, Craig Thomas (clthomas@mit.edu or 3-6846).

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**Author** \_\_\_\_\_

**Primary Dept.** \_\_\_\_\_

**Degree(s)** \_\_\_\_\_ **Graduation date** \_\_\_\_\_  
mm/yyyy

**Thesis title**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Pages to be substituted**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reason for substitution**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

► **Author:** I request permission to substitute the page(s) listed above. I understand that, if the request is approved, I must submit to the Archives on the required paper the correct number of copies of the pages to be substituted.

Signature of author \_\_\_\_\_ Date \_\_\_\_\_  
mm/dd/yyyy

► **Thesis Supervisor or Dept./Program Chair:** I approve the substitution(s) listed above.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
mm/dd/yyyy

Name \_\_\_\_\_ Supervisor \_\_\_\_\_ Chair \_\_\_\_\_

► **Dean for Graduate Education:** I approve the substitution(s) listed above and direct the Institute Archives to make the prescribed changes in all versions of the applicant's thesis.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
mm/dd/yyyy

Name \_\_\_\_\_