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| **Program Type** | **Academic Year and Semester**  |
| [ ] Master with thesis[ ] PhD | Academic Year | 202..-202.. | Semester | [ ] Fall | [ ] Spring |

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| Name of the Program  |  |
| Thesis Title |  |

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| --- | --- |
| Student Name&Surname |  |
| Student No |  | Signature |  | Date |  |

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| --- | --- | --- | --- | --- | --- |
| Thesis Supervisor 1(Title, Name&Surname) |  | Signature |  | Date |  |
| Thesis Supervisor 2(Title, Name&Surname)(if applicable) |  | Signature |  | Date |  |

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| **Thesis Defence Details** |
| Date:  | Hour:  | Place:  |

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| **Decision of the Jury** |
| [ ]  Approved | The candidate named above has satisfactorily completed his/her thesis/dissertation work. |
| [ ]  Approved Upon Alteration | The candidate named above should resubmit his/her thesis/dissertation to the jury members with the required alterations, within **not more than one month for master’s students and within not more than three months for PhD students after the defence date.** |
| [ ] Repetition of Defence | The candidate named above should defend his/her thesis/dissertation again within **not more than three months for master‘s students and within not more than six months for PhD students after the defence date.** |
| [ ] Rejection | The candidate named above has not satisfactorily completed his/her thesis/dissertation work. |

Form should be submitted to the Dean of the Faculty to be sent to the Institute of Graduate Studies and Research.

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| **Jury Report (To be completed by the Chair of the Jury)** |
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| **Thesis/ Dissertation Jury** |
|  |  Title, Name&Surname | Affiliation | Signature |
| Jury Member 1Chair of the Jury |  |  |  |
| Jury Member 2Supervisor |  |  |  |
| Jury Member 3 |  |  |  |
| Jury Member 4 |  |  |  |
| Jury Member 5 |  |  |  |
| Jury Member 6Co-Supervisor |  |  |  |
| Jury Member 7 |  |  |  |

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| Dean of the Faculty(Title, Name&Surname) |  | Signature |  | Date |  |

The Dean of the Faculty should inform the Institute of Graduate Studies and Research about the result of the defence by sending the approved report.

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| Director of the Institute(Title, Name&Surname) |  | Signature |  | Date |  |