



T.C.
İSTANBUL AYDIN UNIVERSITY
INSTITUTE OF SOCIAL SCIENCE
TERM PROJECT TOPIC CHANGE FORM

Date : .../.../20...

Student Name Surname :

Signature :

Student ID :

Program :

Current Term Project Topic :.....

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New Term Project Topic :.....

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Term Project Supervisor

Name Surname :

Signature :

President of Main Branches of Science

Name Surname :

Signature :

Institute of Social Sciences Approval

Date of Board Decision :

Number of Board Decision :