**DISSERTATION SUBMISSION FORM FOR JURY**

…/…/20…

To the Institute of Graduate Studies,

I am currently enrolled in the Department of ………….………………………………………………………, …………………………………………… Program of your Institute with student number …….. ………………………. I have completed and hereby submit my dissertation titled “……………. ……………………………………..……………......………………………………………………………………………….…………………………………………………………………………………”.

I kindly request you to take necessary action accordingly.

Candidate’s Name-Last Name/Signature

 **Name-Last Name Date Received Signature**

1. Thesis Supervisor : ............................ ………….
2. Permanent Member : ............................ ………….
3. Permanent Member : ............................ ………….
4. Permanent Member : ............................ ………….
5. Permanent Member : ............................ ………….
6. Substitute Member: ............................ ………….
7. Substitute Member: ............................ ………….

**Attachment:** Approved Similarity Rate

**APPROVAL FORM FOR DOCTORAL DEFENCE DATE**

 …./…./20….

To the Institute of Graduate Studies,

The members of the doctoral dissertation committee for ……………………………………., student number ………………………………, from ……………………………………. program have agreed that the doctoral defence of the candidate will take place on ……/.…/20… at …………….. .

You are kindly requested to take the necessary action.

Thesis Supervisor

Name-Last Name

 Signature