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T.C.
ISTANBUL AYDIN UNIVERSITY
INSTITUTE OF SOCIAL SCIENCES
TERM PROJECT/THESIS WORK
SIMILARITY CONTROL FORM

To the Institute of Social Sciences

I am declaring that the Term Project/Master Thesis/PhD Thesis written by.....
.....with the student number.....of
the.....
.....with Thesis/without Thesis/PhD program with the
title “.....”
which I currently supervise has been checked and the similarity result is%. The
print out of the result from the program is attached.

Thesis/Term Project

Supervisor

First-Last Name

Signature

President of Main Branches

of Science/Art

First-Last Name

Signature

Approval by the Institute :

First and Last Name /Signature/Date :