

JURY THESIS SUBMISSION FORM

		/20
To the Institute of Social Sciences,		
I am currently enrolled in the Department of		
Program of your In		
I have completed and hereby sub-	•	
I kindly request you to take necessary action according		
I killuly request you to take necessary action according	ıy.	
	Student Name-Last N	lame/Signature
<u>Name-Surname</u>	Received Date	Signature
Name Sarname	Received Bate	<u> Signature</u>
1. Thesis Supervisor :		
2. Permanent Member:		
3. Permanent Member:		
4. Substitute Member :		
5. Substitute Member :		
The members of the dissertation committee for	, S	tudent number
, from	program have ag	reed that the
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	

Attachment: Approved Similarity Rate

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