

**FENERBAHÇE UNIVERSTIY** **GRADUATE SCHOOL**

**THESIS PROPOSAL DEFENSE REQUEST FORM**

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| **STUDENT INFORMATION** | |
| Name Surname |  |
| Student ID |  |
| Name of  Department |  |
| Name of Program |  |
| Level of Program | Doctorate |
| Academic Year | 20…../ 20…… FALL SPRING |
| Thesis Advisor |  |

I would like to submit my thesis proposal defence orally in front of the thesis tracking committee at the date, time, and place stated below with my kind regards I kindly request the necessary information.

Name Surname: Signature:

|  |  |  |
| --- | --- | --- |
| **Exam Information** | | |
| Exam Date | : |  |
| Exam Time | : |  |
| Exam Place | : |  |

|  |  |  |
| --- | --- | --- |
| Thesis Title | : |  |

**IMPORTANT NOTE:** Students who are successful in the doctoral qualification exam defend orally in front of the tracking committee the proposal, which includes the purpose, method, resources and study plan of the graduate work they will prepare, within six months at the latest after the qualification exam date. The student distributes the graduate work proposal to the committee members at least fifteen days before the date of the oral defense.