

**FENERBAHÇE UNIVERSITY GRADUATE SCHOOL**

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| **THESIS DEFENSE REPORT**  …/…/20… |

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| **STUDENT INFORMATION** | |
| Student ID |  |
| Name Surname |  |
| Name of Department |  |
| Name of Program |  |
| Type of Program | Master’s (Thesis) |

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| **THESIS TITLE** |
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| **THESIS DEFENSE JURY** | | |
| **Faculty Member** | **Signature** | **Decision** |
|  |  | Approve  Revise  Reject |
|  |  | Approve  Revise  Reject |
|  |  | Approve  Revise  Reject |

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| **JURY JOINT DECISON** |
| The thesis exam of the student, whose open identity is given above, has been conducted at …. /…./20…. and has lasted for ……:….. hours and ……… minutes. The decision regarding the Approval / Revision / Rejection of the thesis of the student has been decided through unanimous / majority vote. |

**IMPORTANT NOTICE:** This form should be submitted to the Graduate School within three days after the exam date. If the student's work is deemed unsuccessful, a separate report stating the reason should be arranged.