

 **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 |  [ ]  Doctorate |

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| **THESIS/PROJECT TITLE** |
|  |
| Is there a change made to the title? Yes [ ]  No [ ]  |

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| **NEW THESIS TITLE** (This section should be filled if there is a change made to the thesis title.) |
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| **THESIS DEFENSE JURY** |
| **Faculty Member** | **Signature** | **Decision** |
|   Thesis Advisor |  | [ ]  Approve [ ]  Revise [ ]  Reject |
|  |  | [ ]  Approve [ ]  Revise [ ]  Reject |
|  |  | [ ]  Approve [ ]  Revise [ ]  Reject |
|  |  | [ ]  Approve [ ]  Revise [ ]  Reject |
|  |  | [ ]  Approve [ ]  Revise [ ]  Reject  |

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| **JURY JOINT DECISION** |
| 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 Institute within three days after the exam date. If the student's work is deemed unsuccessful, a separate report stating the reason should be arranged.