

**FENERBAHÇE UNIVERSITY GRADUATE SCHOOL**

 **REPORT OF BOUNDED THESIS DELIVERY AFTER DEFENSE**

…../…../20….

**Author of the Thesis**

Name Surname :

Student ID :

Phone Number :

Email Address :

Department :

Type of Thesis : Master’s (Thesis)

Title of Thesis :

Advisor :

Term and Date: FALL 20…….. SPRING 20……..

To the Graduate School Directorate,

I declare that I have completed my

…………………………………………………………………………… department …………..……………….…………………… program master's thesis titled “………………………………………………………………………………….......................................................................” according to the Term Project and Thesis Writing and Printing Guide one month from the thesis defense exam. I declare that I have delivered 3 binded copies signed by the jury, 1 one USB copy (uploaded as a PDF), and a copy of the Thesis Data Access Form to the Intitute Directorate.

 I kindly request your information.

|  |  |
| --- | --- |
| **Date of Defense** | …/…/20… |
| **Thesis Data Access Form** | Reference No: |
| **Orcid ID** | Reference No: |

|  |  |
| --- | --- |
| **Student Who Delivered Thesis and USB to the Graduate School** | **Graduate School Personnel Who Received Thesis and USB** |
| Name Surname |  | Name Surname |  |
| Signature |  | Signature |  |