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| **Student Information** | | | |
| Student’s Name and Surname |  | Student ID Number |  |
| Program Title |  | | |
| Academic Year and Semester |  | Signature  Date |  |
|  | | | |
| **Title of the thesis \*** | | | |
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**\* Attach your proposal which should include preliminary literature review, problem statement, research question, proposed research method and references. The attached proposal should not be less than 1000 words.**

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| **Approval** | | | | |
| Supervisor  *Title, Name and Surname* |  | Approved  Not Approved | Signature  Date |  |
| Department Chair  *Title, Name and Surname* |  | Approved  Not Approved | Signature  Date |  |
| Dean/Director  *Title, Name and Surname* |  | Approved  Not Approved | Signature  Date |  |

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| **Approval of the Institute** | | | | |
| Director  *Title, Name and Surname* |  | Approved  Not Approved | Signature  Date |  |