

**MASTER'S DEGREE FORMS****THESIS TOPIC/TITLE CHANGE
REQUEST FORM**

Document Code

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1 / 1**STUDENT**

Name and Surname:

Student No:

Department :

Program :

Contact Number:

Thesis Supervisor :

E-Mail Address:

Scope of Change

Thesis Title

Thesis Topic

Thesis Title and Topic

Current Thesis Title :**Proposed New
Thesis Title :****Reason for
Thesis Title /
Topic Change :**

NOT: Please also attach and submit the updated **Form FBE-FR-Y1 – Master's Thesis Proposal Form** revised according to the new thesis topic/title.

I respectfully request that the thesis title/topic of the master's student whose name, surname, former title, and new title are provided above be updated and replaced with the new one.

Date

/ /

Signature

Signature

Student

Thesis Supervisor

TO THE DIRECTORATE OF THE INSTITUTE OF NATURAL SCIENCES

I hereby submit the proposed change regarding the thesis topic/title of the master's student whose name and surname are provided above.

Signature / E-signature

Head of Department

Prepared by

Institute IT Unit

Checked by

Institute Quality Commission

Approved by

Institute Director