MASTER'S THESIS DEFENSE EXAM EVALUATION FORM

TR IDENTITY NUMBER: .................................................................

NAME-SURNAME: .................................................................

STUDENT NUMBER: .................................................................

GRADUATE PROGRAM: ............................................................... 

THESIS TITLE: ..................................................................................

NEW THESIS TITLE (*): ................................................................. 

Above-stated student has taken the master's thesis exam again as per İstanbul Commerce University Graduate Education and Training on …../…../20… at ……… by the thesis jury formed during the meeting of the board of directors numbered..................dated …../…./20…. of the graduate school of.................. Student's thesis has been examined and as a result of the........minute defense, it has been concluded at the Master's Thesis Defense Exam that the thesis shall, by absolute majority/ common consent, be

- ACCEPTED
- CORRECTED**
  Period for Correction: ................. (max 3 months) New Defense Date: …../…./20….
- REJECTED

ADVISOR

MEMBER MEMBER

Submission date of the signed copy of the Thesis by the Exam Jury Commission:

Student's Signature:

* This part shall be filled in if the thesis title is to be changed during the exam.
** At the end of the period given for correction, the student defends his/her thesis in front of the same jury.