

## **Defense Committee Appointment Form**

Part I Student and Thesis Inf	formation	,				
Name and Surname		Student ID Number	Study Program			
Thesis/Project Title						
Part II Confirmation on Fulfil	lment of All Academic and Financial	l Requirements				
Official Statement		Name of Officer	Signature			
Required ECTS credits are accrued (Confirmation by Graduate Office)						
All financial obligations are (Confirmation by Finance D						
	at the Thesis/Project May be Defended by the Plagiarism Report to the Name and surname		Date			
Mentor						
Part IV Appointment of the I	Defense Committee (Proposed by th	ne mentor)				
	Academic Title and Name	University	Signature			
Mentor						
Member of the committee						
Member of the committee						
Member of the committee						
Member of the committee						
Substitute member of the committee (from IUS)						
For Official Use Only						
Part V Approval of the Defense Committee Appointment by the Faculty Council						
	Name and Surname	Signature	Date			
Appointment approved by the Faculty Dean						



## FOR GRADUATE OFFICE USE

## **Fulfillment of Requirements** -Pre-Defense-

Acquired ECTS			
Mentor Appointment	YES		NO
Thesis Proposal Approval			
Track Transfer Approval			
Diploma Validation Process			
Thesis Registration			
Similarity Report Submitted			
Date:			
Signature:			