#  T.C.

 **İSTANBUL GEDİK UNIVERSITY**

 THE INSTITUTE OF GRADUATE STUDIES

 TERM PROJECT TOPIC CHANGE FORM

Date : …/…/20…

Student Name Surname :

Signature :

Student ID :

Program :

Current Term Project Topic :……………………………………….…………………...

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New Term Project Topic :……………………………...……………………………...

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Term Project Supervisor Name Surname :

Signature :

President of Main Branches of Science Name Surname :

Signature :