

.../.../20...



T.C.
ISTANBUL GEDİK UNIVERSITY
INSTITUTE OF
THESIS SUBMISSION FORM

To the Institute of,

**I declare that the Term Project written by
.....with the student ID of
the Department of
..... in the
..... program that I supervise with the title
“.....
.....
.....” has been written in accordance with
the general Graduate Dissertation Format determined by the Institute of Social
Science. Similarity rate is% which was supervised by me and the report is
attached.**

I kindly request that the necessary steps be taken for the next procedure.

Thesis Advisor

Name - Surname

Signature

Attached: Approved Similarity Report Printout

*****The similarity report needs to be approved by the thesis advisor.**