|  |  |
| --- | --- |
| amblem | **ÇANKAYA UNIVERSITY**  **Graduate School of Social Sciences** **Thesis/Project Title/Supervisor/Co-supervisor Change Form** |

**Part I. Student & Thesis/Project Information.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student Number** \* | | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  | | | | | **Student Name**\* |  | | | **Program**\* | | | |
|  | Choose program name and type. | | |
| **Signature**\* |  | | |
| **Thesis/ Project Started in**\* | | | | | | | **Type of Change**\* | | | | | | |
| |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  | / |  |  |  |  | | | | | | Choose semester. | | Choose type of change | | | | | | |
| **Justification for Change**  *Attach a report, if needed.* | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |
|  | | | | | | | | | | | | | |
| **Title of the Thesis/Project\***  **(If changed)** | | | **Former** | Enter former title | | | | | | | | | |
| **New** | Enter new title | | | | | | | | | |
| **FORMER** | **Supervisor Name**\*  **(If changed)** | | |  | | | | **Title**\* | Choose a title. | | | | |
| **Department**\* | | | Choose a department. | | | | **Signature**\* |  | | | **Date** |  |
| **NEW** | **Supervisor Name**\*  **(If changed)** | | |  | | | | **Title** | Choose a title. | | | | |
| **Department**\* | | | Choose a department. | | | | **Signature**\* |  | | | **Date** |  |
| **FORMER** | **Co-supervisor Name** | | |  | | | | **Title** | Choose a title. | | | | |
| **Institution**  ***Give full address if other than Çankaya University.*** | | |  | | | | | | | | | |
| **Department** | | |  | | | | **Signature** |  | | | **Date** |  |
| **NEW** | **Co-supervisor**  **Name** | | |  | | | | **Title** | Choose a title. | | | | |
| **Institution**  ***Give full address if other than Çankaya University.*** | | |  | | | | | | | | | |
| **Department** | | |  | | | | **Signature** |  | | | **Date** |  |

**Part II. Approval of Department Chair.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Department Chair** |  | **Signature** |  | **Date** |  |

**NOTES:**

**1. ALL RELEVANT FIELDS SHOULD BE FILLED IN *(***\****FIELDS ARE REQUIRED).***

**2. THE STUDENT SHOULD FILL IN THIS FORM ON THE COMPUTER IN CONSULTATION WITH THE SUPERVISOR AND HAND IT IN TO THE DEPARTMENT.**

**3. GRADUATE SCHOOL WILL NOT ACCEPT INCOMPLETE OR/AND HAND WRITTEN FORM.**