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| **T.C.****İSTANBUL MEDİPOL UNIVERSITY**  **GRADUATE SCHOOL OF SOCIAL SCIENCES****STUDENT THESIS PROPOSAL FORM** |
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| Student Name- Last Name: |  |
| Student ID: |  |
| Program Name: |  |
| Proposal of Thesis Advisor: |  |
| Proposal of Thesis: |  |

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|  Approved By Student Name- Last Name Thesis Advisor Name Signature Signature Approved By Head of Department Signature |