GR.43 Requesting Approval of Thesis Publishing for Graduation in a Doctoral Program

Name-Surname Mr./ Mrs./ Miss
ID Number D
Doctoral Program / field of study
Faculty / Institute / College
Contact student by TelFaxe-maile-mail
Major Advisor Prof./ Assoc. Prof./ Asst. Prof./ Dr
Title of Thesis has been approved by Dean on date
Thesis Defence Examination: Not yet taken exam
Examination taken on (date)
☐ Passed ☐ Passed with conditions
Requesting approval of International peer –reviewed journal: 1. Journal (attach 1 copy of the latest issue)
Signature for student / Date
Comment of Major advisor
Should be submitted for consideration by the Dean
Signature for Major advisor / Date