BEYKOZ UNIVERSITY

GRADUATE PROGRAMS INSTITUTE

TERM PROJECT SUBJECT CHANGING FORM

|  |  |
| --- | --- |
| **Student Name and Surname** |  |
| **Student Number** |  |
|  Student Graduate Program |  |
|  Academic Semester  |  |

|  |  |
| --- | --- |
| Former Term Project Subject   |   |
| New Term Project Subject |   |

|  |  |
| --- | --- |
| **Term Project Advisor Title and Name-Surname** |  |
| **Term Project Advisor Signature** |  |
| **The Head of The Program** **Department Title and Name-Surname** |  |
| **Signature of The Head of The Department** |  |
| **Student Signature** |  |
| **Date** |   |