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| **OSTİM TECHNICAL UNIVERSITY**  **GRADUATE SCHOOL OF ENGINEERING AND SCIENCES**  CHANGE OF ADVISOR  ......./......../20...  TO THE HEAD OF THE DEPARTMENT OF …………………….……….  I am a **Master's/ PhD/Integrated PhD** student registered with the ............................................ number of your Department. For the reason I stated below, I kindly request your permission and necessity for the replacement of my advisor.   |  |  | | --- | --- | | Current Advisor's Title, Name and Surname |  | | Proposed Advisor's Title, Name and Surname |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Load of the Proposed Consultant | Master's Degree | PhD Degree | Total | | | | Number of Enrolled Students |  |  |  | | | | Number of Students from Other Institutes |  |  | | Foreign-National/ÖYP/ Article35/Student Amnesty Number |  |  | | Number of Students as a Second Advisor |  |  | | Reason: | | | | |  | | ............................................................................................................................ | | | | | Name-Surname Signature  Student | | ............................................................................................................................ | | | | |  |  Opinion of the Current Consultant:......./......../20... The request of ............................ , a the **Master's/PhD/Integrated PhD** Student I was advising, approved by me.  Title / Name Surname  Current Advisor   |  | | --- | | **Proposed Advisor's Acceptance Statement:** ......./......../20...  I accept to be the advisor of the student. |   Title / Name Surname Signature  Recommended Advisor |
| TO THE DIRECTORATE OF THE INSTITUTE OF NATURAL AND APPLIED SCIENCES   |  |  | | --- | --- | |  | Title / Name Surname Signature  Head of the Department |   ......../........./20...  Change of Advisor requested above was  APPROVED NOT APPROVED |
| Decision **OFTHE BOARD OF DIRECTORS OFTHE INSTITUTE DECISION No**: **…./….Date: ......../......../20….**   |  | | --- | |  | | Title / Name Surname Signature | | Director of the Institute |   APPROVED NOT APPROVED |
| IN ACCORDANCE WITH OSTİM TECHNICAL UNIVERSITY GRADUATE EDUCATION AND TRAINING REGULATION,   1. The conditions for the appointment and replacement of the thesis advisor and the second thesis advisor are determined by the relevant institute board. (ARTICLE 24/2)   - This form is submitted to the Head of the Department to be forwarded to the Institute. Master Thesis Proposal Form for Master's Students **(Form YL 2 )** |