



NEAR EAST UNIVERSITY
GRADUATE SCHOOL OF APPLIED SCIENCES

MASTER'S THESIS PROPOSAL FORM

This form should be used if a new Thesis is proposed.

Please fill in the form completely and submit the Printed Copy, which has the approval of the Department Chairperson to the Graduate School of Applied Sciences. Graduate School will finalize the application.

Part I. Student & Thesis Information <i>(To be completed by the supervisor)</i>			
Student Number		Student Name and Last Name	
		Department	
Starting Date of the Thesis			
Academic Year	20...../20.....	Semester	<input type="checkbox"/> Fall <input type="checkbox"/> Spring
Title of the Thesis			
Major Field of Study			
Minor Field of Study			
Originality of the Thesis			
Description of the Thesis proposal			

Laboratory Required		
	Software	Description
1		
2		
	Hardware	Description
3		
4		

Software and Hardware Requirements		
1		<input type="checkbox"/> Available <input type="checkbox"/> Not Available
2		<input type="checkbox"/> Available <input type="checkbox"/> Not Available
3		<input type="checkbox"/> Available <input type="checkbox"/> Not Available
4		<input type="checkbox"/> Available <input type="checkbox"/> Not Available
5		<input type="checkbox"/> Available <input type="checkbox"/> Not Available

Part II. Student's Approval		
I agree to take the above thesis as a part of my graduate study.		
----/----/-----		
----- Student Name	----- Signature	----- Date

Part III. Student's Declaration on Plagiarism		
I declare that the thesis that I will submit to the Graduate School of Applied Sciences will be the result of my own independent work. Material from the work of others will be fully cited and referenced as required by the scientific research ethics. If any kind of plagiarism is detected in my thesis, the disciplinary action can be taken.		
----/----/-----		
----- Student Name	----- Signature	----- Date

Part IV. Supervisor's and Co-Supervisor's Approval					
Supervisor		Signature		Date	
Co-supervisor		Signature		Date	

Part V. Department Chairperson		
Dept. Chairperson Title and Name	----- Signature	----/----/---- Date

Part VI. Approval of Graduate School		
Director of the Graduate School of Applied Sciences	----- Name/Surname	----- Signature
		----/----/----- Date Received