

## Request for a Change in Dissertation/Thesis Title

Student's  
Name & Surname

I.D. Number

Current Title

New Proposed  
Title

Reason for  
Change

Student's  
Signature

Date

Supervisor's  
Recommendation

Supervisor's  
Name

Supervisor's  
Signature

|   |  |
|---|--|
| <b>Faculty Board<br/>Recommendation</b> |  |
|---|--|

|                         |  |             |  |
|-------------------------|--|-------------|--|
| <b>Dean's Signature</b> |  | <b>Date</b> |  |
|-------------------------|--|-------------|--|