



FEYZIYE SCHOOLS FOUNDATION  
**IŞIK UNIVERSITY**  
SCHOOL OF GRADUATE STUDIES

**PHD QUALIFICATION  
EXAM JURY  
RECOMMENDATION  
FORM**

<b>PhD Program</b>	_____
<b>Student Number</b>	_____
<b>Student Name</b>	_____
<b>Supervisor</b>	_____
<b>Thesis Title</b>	_____

The proposed PhD qualification examination jury for the above student is presented below.

Date of filled out the form: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date of Oral Exam : \_\_\_\_/\_\_\_\_/\_\_\_\_

Hour:

Date of Written Exam : \_\_\_\_/\_\_\_\_/\_\_\_\_ Head of Department

Hour: Name : \_\_\_\_\_

Signature: \_\_\_\_\_

**RECOMMENDED PHD QUALIFICATION EXAMINATION JURY**

Name, Title, Department

	<b>Name</b>	<b>Organization</b>
<b>Supervisor</b>	_____	_____
<b>Member</b>	_____	_____
<b>Member</b>	_____	_____
<b>Member</b>	_____	_____
<b>Member</b>	_____	_____
<b>Reserve Member</b>	_____	_____
<b>Reserve Member</b>	_____	_____

Graduate School Contact Information

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