FORM: GJE-YL-001

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| |  |  |  | | --- | --- | --- | | **ÖĞRENCİNİN:** | | | | **Numarası** | **:** |  | | **Adı Soyadı** | **:** |  | | **Anabilim Dalı** | **:** |  | | **Programı** | **:** | .................... | | **Öğretim Yılı / Dönemi** | **:** | .......... / .......... |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Danışmanın:** | | | | | | | | | | | | **Unvanı Adı Soyadı** | **:** | .......... Metin girmek için burayı tıklatın. | | | | | | | | | | **Anabilim Dalı** | **:** | .................... | | | | | | | | | | **Programı** | **:** | .................... | | | | | | | | | | **Devam Eden Danışmanlık Sayısı**  **(Tezsiz Yüksek Lisans Hariç)** | **:** | **Yüksek Lisans** | **:** |  | **Doktora** | **:** |  | **Toplam** | **:** |  | | **Bitirilen Tez Sayısı**  **(Tezsiz Yüksek Lisans Hariç)** | **:** | **Yüksek Lisans** | **:** |  | **Doktora** | **:** |  | **Toplam** | **:** |  |  |  |  | | --- | --- | | **Yürütülen Dersler:** | **Durum** | | \*Lisans düzeyinde en az iki yarıyıl ders vermiş olmak. | ............... | | \*\*Lisans düzeyinde en az dört yarıyıl ders vermiş olmak. | ............... | | \*\*Veya Lisansüstü düzeyinde en az iki yarıyıl ders vermiş olmak. | ............... |  |  |  | | --- | --- | |  |  | | Metin girmek için burayı tıklatın. | .......... Metin girmek için burayı tıklatın. | | Öğrenci (İmza) | Danışman (İmza) | | Tarih girmek için burayı tıklatın. |  |  |  | | --- | |  | | .......... Metin girmek için burayı tıklatın. | | ................. |   Açıklamalar (İmza) |