**THE REPUBLIC OF TURKİYE**

**MUĞLA SITKI KOÇMAN UNİVERSİTY**

**INSTITUTE OF EDUCATIONAL SCIENCES**

**DEPARTMENT OF ……………….**

**………………. PROGRAM**

**THE TITLE OF THE PROJECT**

**THE AUTHOR OF THE PROJECT**

The Supervisor’s Acceptance date for the term Project: xx/xx/xxxx

**Name and Surname with the Title of Project Supervisor**

This Project has fulfilled all requirements for acceptance as a term project in Non-Thesis MA program of …………………….

Name and Surname accompanied with the title

Director of the Institute of Educational Sciences