

SAGESSE UNIVERSITY  
Faculty of Business Administration and Finance

MBA Thesis Defense Request  
(FORM C)

Student's Full Name: ..... ID .....

Student's Concentration: .....

Supervisor's Name: .....

Thesis Title:  
.....

Total Number of Pages: ..... Defense Requested Date: .....

**Note: Please attach the abstract and Turnitin reports to this form signed by the supervisor**

Signatures and Dates:

\_\_\_\_\_  
Student    Supervisor    Reader

\_\_\_\_\_  
Date    Date    Date

Turnit in review                                  Date.....                                  Result .....

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