**TO THE DEAN OF THE ISTINYE UNIVERSITY FACULTY OF PHARMACY**

I respectfully accept, declare and undertake that within the context of PHA 514 - Social Responsibility Project course, I will be acting ethically in my volunteer work; I will not organize and/or participate in any event that will damage the corporate image of İstinye University and I will be carrying the full responsibility for my work in the field.

**Date :**

**Student Number :**

**Student Name and Surname :**

**Signature :**