

COURSE REGISTRATION FORM

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то	THE FA	CULTY	OF	••••••	••••••	DEANERY,	
I am t	he student i	n the Fac	ulty of				
at			department	t.			
	/	academi		semester , .	I hereby	submit to y	excuse given below in the cour information the necessity
Best I	Regards,						
Name	e-Surname	:					
Student ID Number		ber :					
Subject		:					
Mobile Phone		:					
							Signature:
Reaso	on of Excus	se:					S
No	Course Code	Co	ourse Name	Credit	ECTS	Section	Substituted Course (If Any)
1							
2							
					-	1	

No	Course Code	Course Name	Credit	ECTS	Section	Substituted Course (If Any)
1						
2						
3						
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Advisor's Approval	Financial Affairs Directorate			
Name- Surname:	Name- Surname:			
Date- Signature:	Date- Signature:			