**IŞIK ÜNİVERSİTESİ .......................... FACULTY**

**PETITION FORM**

ID : ..…………………….. Petition Date: … / … /2024

Name Surname : ....................................

Department : ………….....................

Term/GPA : …../ …..

Cell Phone : ………………………..

E-mail : .....................@isik.edu.tr

**Content:**

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Note: *.You can use an extra A4 paper for details.*  Sincerely

 **Attachment:** Transcript and CCR (Signature)

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| **Advisor Name** : **Advisor Review** : ........................................................................................................... ................................................................................................................................................................. ................................................................................................................................................................. .................................................................................................................................................................. ..................................................................................................................................................................GPA : TERM : ............................... (sign) **Bölüm Görüşü (gerekirse):** .................................................................................................................... .................................................................................................................................................................. .................................................................................................................................................................. |

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|  Dekanlığa havale nedeni: FYK’na karar için  |  |  Dosyalama için |  |